



Letter of Intent to Participate in College Credit Plus for Nonpublic Students

Complete this form and submit to the Ohio Department of Education by April 1.

PLEASE PRINT:

Student Name _____

Parent/Guardian Name _____

Home Address _____

PLEASE INDICATE PREFERRED METHOD OF CONTACT:

Parent Phone Number (Day) _____ (Evening) _____

Parent Email Address _____

Student Contact Info _____

School _____ 2015-2016 Grade _____

I would like to declare my intent to participate in the College Credit Plus program during the coming school year. I understand that signing this form does not require me to participate during the 2015-2016 school year and that I may decide not to participate without consequence.

I also understand that submitting this Letter of Intent does not guarantee admission to a college or university or the funding required to support my participation in College Credit Plus. I understand it is my responsibility to apply to a participating institution of higher education for admission under College Credit Plus, and that, upon admission to an institution of higher education, it is my responsibility to obtain, complete and submit an *Application for College Credit Plus Funding*.

In addition, I certify that I have received counseling about the College Credit Plus program concerning the rules and procedures for both my school and the college, and I understand my responsibilities, the benefits and possible risks of participating in the College Credit Plus program.

Student Signature _____

Date: _____, 2015

Parent Signature _____

Date: _____, 2015

Please complete, print, sign and return by April 1 to CCP@education.ohio.gov or send to the Ohio Department of Education, 25 South Front St., Columbus, OH 43215.