

**ELMS COLLEGE**  
**Dual Enrollment Program**  
**PARENTAL REVIEW AND CONSENT**

I (we) have reviewed the Elms College Dual Enrollment Program with

\_\_\_\_\_

and his/her counselor, and I (we) consent to his/her participation in the program  
for the academic year 2019 - 2020.

Signatures: \_\_\_\_\_ Date \_\_\_\_\_  
Parent or Guardian