

COLLEGE CREDIT PLUSCOURSE REGISTRATION FORM

	STUI	DENT LAST NAME		STUDENT FIRST NAME			EDISON STATE STUDENT ID				HIGH SCHOOL		
Academic Year: Semester: Summer Fall Spring Full Year For additional information, visit www.edisonohio.													
Acader	nic Year:			Semester: \square S	Summer L	□ Fall □ Spring □ Full Yea	ar For a	additional infori	mation, visit <u>v</u>	<u>vww.edisonohi</u>	o.edu/ccp		
	Designation forms may be submitted in newson at any sample (Student Affairs) or via small to CCD@edisonable adv										REGISTRA	REGISTRATION -FOR OFFICE USE ONLY	
Registration forms may be submitted in person at any campus (Student Affairs) or via email to CCP@edisonohio.edu . Search for courses online at https://myescc.edisonohio.edu/Student/Courses													
	Course	Number	Section	Term	СН	Location	Day(s)	Start Time	End Time	Option A	Ву	Date	
EX	ENG	1215	001FS	2023FS	3	Mark Selection	M/W	10:30 AM	11:45 AM	Funding Initial this box if self-paying for course*	each semester of authorization is	ust complete and submit this form for participation. School counselor equired for all schedule changes.	
1						☐ HS ☐ Piqua ☐ Eaton☐ Online ☐ Greenville ☐ Troy						ssistance, contact 937.778.8600 .1525 (Troy), 937.548.556 (Greenville), 69 (Eaton).	
2						☐HS ☐Piqua ☐Eaton☐Online ☐Greenville ☐Troy					Ohio Administrative Code 3333.1.65.2: High schools must verify students are not taking more than 30 credit hours per academic year. To avoid going over 30 credit hour maximum,		
3						☐HS ☐Piqua ☐Eaton ☐Online ☐Greenville ☐Troy							
4						☐HS ☐Piqua ☐Eaton ☐Online ☐Greenville ☐Troy					please calculate		
5						☐HS ☐Piqua ☐Eaton ☐Online ☐Greenville ☐Troy						school units x 3)=Total number of vailable for the student to take this	
	DRO	OP CLASSES (Comple	ete this section	to drop or withdr	aw from re	egistered courses) - Deadlines	can be found a	t <u>www.edisonoh</u>	io.edu/ccp.			Summer semester credits +	
1												dits + Spring semester credits	
2											=		
3												be billed by Edison State the rd tuition rate for the entire	
4												h surpass the limit and/or are	
5											indicated as "C	Option A Funding" (self-pay).	
course wit	hdrawn or not successfu		hat if I elect Option A Fu	inding or exceed state-pro	vided funding, I	ND that I am ready to accept the responsib /my parents will be billed by Edison State and						chool district for all associated costs related to any dent Code of Conduct, academic and general	
Studen	t Signature					Date							
		esponsibilities of participatin nt section. I authorize this stu				Ident's Letter of Intent and have discussed with	h the student academio	c eligibility and high scho	ol graduation require	ments. I have verified t	e student is within the annu	al credit hour limit and have noted any courses	
	Councelor Signat									_			