

Confirmation and Signature

I have read and understand the above instructions and authorize exchange of my admissions and academic information between A&M-Texarkana and my high school.

Student Signature _____ Date _____ Parent
Signature _____ Date _____

We certify that the above-named student has met the stated requirements listed above and is recommended for dual credit/concurrent enrollment at A&M-Texarkana.

Principal/Counselor Signature _____ Date _____

State law requires that you will be informed of the following: 1) you are entitled to request to be informed about the information about yourself collected by use of the form (with a few exceptions as provided by law); 2) you are entitled to receive and review that information; and 3) you are entitled to have the information corrected at no charge to you.