



Dual Enrollment Exception Request Form

Complete this form to request for a **ONE SEMESTER EXCEPTION** to the minimum standards outlined in the Dual Enrollment Articulation Agreements. An appeal will only be considered with the support of the High School Designee and proper supporting documentation. Requests without the High School Designee's signature or supporting documentation will automatically be denied.

Student Name: Last _____ First _____ Middle _____

Student ID: _____

High School Name: _____

Semester (Check one): Fall ☐ Spring ☐ Summer ☐

Academic Year: _____

Exception Request Type

☐ Exception for minimum GPA requirement

☐ Exception for 60 credit hour rule

☐ 3rd Course Attempt

☐ Other _____

Supporting Documentation Type:

☐ Student letter of appeal as to why an exception should be allowed

☐ High School Designee letter in support of appeal

☐ Transcript indicating current GPA

☐ Graduation requirements

Explanation for Exception

High School Section

High School Official Name (Print): _____

High School Official Signature _____ Date: _____

Email: _____ Phone: _____

IRSC Section

IRSC Dual Enrollment Official Name (Print): _____

IRSC Dual Enrollment Official Signature: _____ Date: _____

☐ Support Request

☐ Do Not Support Request