

EARLY COLLEGE CREDIT PROGRAM (ECCP) - FINAL CHECKLIST

Submit this as the cover page with your ECCP Packet

ECCP requests must be submitted to Student Services by **Oct. 1st** (for spring semester requests) or **March 1st** (for fall semester requests)

Late submissions will not be honored.

STUDENT NAME: _____

SCHOOL: _____

SCHOOL COUNSELOR: _____

Please check that all the items listed below are attached and completed before submitting.
If there is missing information, the ECCP packet will be returned to you.

- ECCP REQUEST PROCESS – STUDENT SIGNATURE & DATE
- ECCP REQUEST FORM – FILLED OUT WITH COURSE/INSTITUTION INFORMATION
- PRINT & INCLUDE DESCRIPTION OF EACH COLLEGE COURSE REQUESTED
- ELMBROOK SCHOOLS EARLY COLLEGE CREDIT PROGRAM APPLICATION
- ECCP UNIVERSITY / COLLEGE APPLICATION FORM(S) – STUDENT & PARENT & COUNSELOR SIGNATURES & DATE

Student please initial:

_____ I understand I am expected to pay for any incidental university/college fees (such as extension fees and parking permit) and for equipment, tools, supplies and consumables (notebooks, workbooks, uniforms) which will become my property and/or as applicable.

_____ I understand that I must return my textbook and materials (in useable condition) to the District Central Administrative Office's Teaching and Learning Department within 2 weeks after the course completion date. If not returned, I will reimburse the cost of the book to the School District of Elmbrook.

_____ I understand that I will be expected to pay any costs associated with the course(s) including books, etc. if I fail the course(s) or do not complete the course(s).

Student Signature

Date

Parent/Guardian Signature

Date

Counselor Signature

Date

Counselor: Packet is complete and appropriate: Yes or No

*IF NECESSARY: Counselor comments/rationale: classes already completed, etc. to justify approved/denied course(s).

Teaching & Learning Department

Date