

## Hmong College Prep Academy (HCPA) PSEO Agreement Form

|                      |                                |  |
|----------------------|--------------------------------|--|
| <b>Student Name:</b> | <b>Student Personal Email:</b> | <b>Part-Time</b><br><b>Full Time</b><br><br>(circle one) |
| <b>College:</b>      | <b>Student Cell Phone:</b>     | <b>Grad year:</b>  |

**Students and parents/guardians must complete this agreement form together (return to the counseling office by 5/30/2025)**

- In order to receive an HCPA diploma, the courses taken at PSEO colleges/universities must be completed along with all other graduation requirements.. \_\_\_\_\_(initial)*
- I understand it is my responsibility to know and understand the policies and processes of the college I am attending. This includes registering for classes, contacting professors, handling absences, and using resources when necessary. \_\_\_\_\_(initial)*
- I am responsible for registering for the correct number of credits and classes needed to earn my high school diploma. I will provide a copy of my schedule to my PSEO counselor prior to the start of the semester. \_\_\_\_\_(initial)*
- I understand in order to be a full-time student I need to be registered for 12 credits or more. If I am registered for less than 12 credits I will be a part-time student who will need to take class (es) at the HCPA. \_\_\_\_\_(initial)*
- I understand that if I withdraw from a college class after the 1st 10 days of the semester an NG can be assigned to the course and will affect my GPA. \_\_\_\_\_(initial)*
- I understand that a grade of F from my PSEO courses will be an F on my HS transcript and will negatively affect my GPA. \_\_\_\_\_(initial)*
- I understand that I will need to meet with my PSEO counselor(s) regularly to receive current updates for HCPA students \_\_\_\_\_(initial)*

**Student Signature** \_\_\_\_\_ **Parent signature** \_\_\_\_\_

**Counselor signature** \_\_\_\_\_ **Date** \_\_\_\_\_