

Student Name: _____

JumpStart Release is the procedure whereby a high school student is allowed to leave school during normal school hours for the purpose of taking college level courses. This form must be completed, and prior approval from the school must be given in order to register for courses at the college.

HCPSS Eligibility

Applicants must meet the following conditions:

1. Have completed a four-year plan for high school graduation and are on track to complete that plan.
2. Be able to meet credit counts for completion of the grade level they are enrolled in by June of the year in which the request will be implemented.
3. All students must receive pre-approval from their high school counselor via Synergy.

Participation Details

- In order to participate in JumpStart courses, the student must:
 - Talk to their counselor about their interest in taking a class at HCC. Complete all required Synergy forms for HCPSS and HCC to share information (student signatures are required). Meet HCC requirements for admission, complete the HCC online application for admission, and provide proof of legal residency through the HCC application process.
 - Meet HCC Readiness Placement Requirements associated with the desired course.
 - Complete this HCPSS JumpStart Release Request Form.

Additional Information

1. Students and families understand that courses taught by HCC faculty are subject to HCC's policies, procedures and academic calendar.
2. Students enrolled in JumpStart must make arrangements on dates the college class is not held, including during snow emergencies or other unexpected school closings. Students can use their own or HCPSS-provided transportation (where available) to go to HCC and utilize on-campus resources during these times. Students are not to be on HCPSS school premises except for their regularly scheduled classes and other authorized school activities.

PARENT SECTION (Please Print)

I request that my child _____ be allowed to have release time from the school day for Periods _____ in order to take the following course(s):

(Optional – students can attach a copy of their HCC course registration)

I recognize that the Howard County Public School System cannot be held responsible for the student once the student leaves school property. I also understand that my child must have transportation to their college. If the student does not have regular transportation, I understand that they will be scheduled into classes for the entire day, and that these classes may not be eligible for credit. **I also understand that the student should not be on school premises except for regularly scheduled classes.** If the conditions upon which approval was granted change, including status of enrollment in HCC courses, I understand that it is my responsibility to inform the school of this change.

Mode of transportation on “A” days: _____

Contact Information: _____

Mode of transportation on “B” days: _____

Contact Information: _____

Parent/Guardian Signature

Date of Application

Parent/Guardian Phone #

Student Signature

Date of Application

COUNSELOR SECTION

Course(s) for which student will be registered:

1. _____ 2. _____ 3. _____

4a. _____ 4b. _____ 5. _____ 6. _____

Student and counselor have created and ensured progress on the four year plan.

Having discussed this request with the student, it is possible for the student to meet graduation requirements with the plan created.

Counselor Name

Counselor Signature

Date

PRINCIPAL SECTION

I have reviewed this request and I approve I do not approve.

Principal Name

Principal Signature

Date