BOWLING GREEN STATE UNIVERSITY

Office of Pre-College Programs

BGSU College Credit Plus: Readmit Request

Student's Name—Last , First Middle initial

BGSU ID #	Date of Birth	Last Semester attended

High School Attending	Current Class Standing	Expected Graduation Year

Select BGSU Campus: Firelands (Huron, OH) Main (Bowling Green, OH)

What semester will you be returning? (Please circle and provide the year)

Summer: _____ (year) **Fall:** _____ (year) **Spring:** _____ (year)

I plan to take BGSU classes (circle all that apply)

On the BGSU Campus Online At my High School

Mailing Address:

_____

Street City State Zip

Home Phone Number (_____) - _____-_____Cell Phone Number (_____) - _____-_____

Email: _____

I certify that I have received counseling concerning the College Credit Plus Program and that I have notified my high school of my intent to participate in the College Credit Plus Program. I verify that the information given on this application is accurate to the best of my knowledge.

Student Signature _____ Date _____

As the school counselor of the student named above, I confirm that the student is in good academic standing at the high school, has submitted an Intent to Participate form for the academic year, and is on-track to graduate with a high school diploma.

School Counselor Signature _____ Date _____

SCAN AND EMAIL COMPLETED FORM TO CCPLUS@BGSU.EDU

292 Hayes Hall
Bowling Green, OH 43403-0020
Phone: 419-372-8943
www.bgsu.edu/college-credit-plus

COLLEGE USE ONLY: