

DETA (Dual Enrollment Tuition Acknowledgement) Form

Return the completed form to DualEnrollment@GwinnettTech.edu



Section A: Student Information

Full Legal Name:

Gwinnett Tech ID # (starts with 900):

High School Name:

High School Graduation Date (MM/YY):

Section B: Student & Parent/ Guardian Acknowledgements:

I / my student may be registering for credit hours not all of which may be eligible for Dual Enrollment funding available under Georgia law (HB 444). Some reasons a course may not be eligible for DE funding include the following: (a) Course not listed on the GaFutures.org directory; (b) Exhausted the 30-credit hour funding cap; (c) a General Education (core) course taken as a 10th grader; (d) Failed to maintain Satisfactory Academic Progress (SAP); (e) Withdrew from two or more courses; (f) Retake a course for which Dual Enrollment funding has been applied; (g) Attend a high school that does not participate in the Dual Enrollment program; (h) Enrolled in a course that the high school will not authorize Dual Enrollment funding to cover; (i) enrolled in a course that is not covered by Dual Enrollment funding for any reason not mentioned.

If I / my student withdraws from a course and dual enrollment funding is not applied, I agree to pay all tuition, fees and books costs associated with the course.

I am responsible for keeping track of the number of credit hours attempted and/or earned in the Dual Enrollment program.

If I / my student is not eligible for dual enrollment funding for a reason listed above I agree to pay all tuition, fees, and book costs that are not covered by the Dual Enrollment funding program by the payment deadline date as noted on the academic calendar posted on the college website. Failure to do so may result in the course(s) being dropped from the student's college schedule.

If I / my student is eligible for HOPE Grant or HOPE Career Grant funding and I / my student want to use the funding source, I agree to complete a DE Lawful Presence and Residency (DELPR) form and authorize the technical college to apply the HOPE Grant and/or HOPE Career Grant towards tuition. I agree to pay all tuition, fees and books costs that are not covered by the HOPE Grant and/or HOPE Career Grant. Additional documentation may be required.

I hereby grant permissions for Gwinnett Technical College to release information of my enrollment and grades, including class schedules and transcripts, to my high school or home study for the purpose of supporting my success as a high school and college student and verifying my high school graduation requirements.

As the student & parent/guardian of the above-named student, my signature on this waiver certifies that I have read, understand and accept the above information and the content regarding Dual Enrollment policies found at GwinnettTech.edu/DualEnrollment and GaFutures.org.

I understand that a high school IEP/504 does not transfer to a college and if the student wants to seek reasonable academic accommodations, it is the responsibility of the student to contact The Office of Special Populations/Disability Services: GwinnettTech.edu/student-services/disability-services

I agree to hold harmless and expressly waive any legal claims that could otherwise be made against Gwinnett Technical College or the Technical College System of Georgia with regard to any authorized actions taken by the technical college, or for any out-of-pocket payments made by me to enroll my student in Dual Enrollment courses .

As the parent or guardian of the above-named student, I give permission for the student to attend Gwinnett Technical College as a dual enrollment student. I understand that I am responsible for the payment of any tuition and fees charged by Gwinnett Technical College resulting from the enrollment in courses ineligible for State of Georgia Dual Enrollment or HOPE funding.

Section C: Student & Parent/Guardian Signatures

After reading and confirming this document, type your name in the signature field below as if you would sign an official document.

Student Name:

Date:

Parent/Guardian Name

Date: