



EARLY COLLEGE PROGRAM

2022 Student Interest Form

IMPORTANT: Return form to the Guidance Office by February 4, 2022 Email: Hoeft.Leslie@brevardschools.org

Student Name		High S	chool	
Last name	First name	Middle initial		
Please check program of interest:	_ ,	3-year track (entering 10 th c	,	
Date of Birth	Student ID Numl	oer	Grade	
Student email address:				
Home AddressStreet Ad	dress	City	Zip	
Parent/Legal GuardianPlease Print		Parei	Parent email address	
Phone				
		PERT) Permission No checking the appropriate b		
YES, I would like my son/daughter to take the PERT to determine eligibility for participation in the Early College Program. I understand that passing scores on the PERT do not guarantee admission to the program.				
I understand that students interested in this program must submit an online EFSC Application for Admission and complete the online Dual Enrollment Orientation.				
NO, I am not interested in participating in the Early College Program at the present time.				
Parent/Legal Guardian Signature			Date	
Student Signature			Date	