



Enrollment Application

P. O. Box 2751 • Baton Rouge, LA 70821-2751 • 225.572.7431 • admissions@LHSCC.org

Be sure to provide us with a reliable, working email address. We will be unable to process any enrollment applications without a functional and legible email address.

Email: _____

Name: _____
 Last First Middle (required)

Address: _____

City: _____ State: _____ Zip: _____

Student Phone: _____ Parent/Guardian Phone: _____

For office use only:

Enrollment # _____

Date Received: _____

Expiration: _____

1st Extension: _____

2nd Extension: _____

Withdraw Date: _____

Withdrawn By: _____

Enroll Bizhub

Grade sheet Tabs/Folder

Email course Math Code

Exams Sent: _____

Course Enrollment Information

Office Use Only <small>Course delivery</small>	Course Number	Course Name	Semester 1 st / 2 nd	Course Fee \$229
		Book fee – if you are taking an online math course		
	Book Fee: If you are enrolling in a math course, there is a \$35 online book fee. Please add to your total.		TOTAL	

To be completed by school administrator, counselor or other designated school official.

School Parish _____ School Name: _____

Phone _____ Ext. _____

Official's Name: _____ Title _____ Email: _____

Address: _____

If the student will be testing off-site, please list the testing center: _____

The student named above has permission to enroll in the high school credit course(s) listed. The testing administered within the school shall be conducted in such a manner so as not to compromise the integrity of the testing results. The materials and procedures shall be properly supervised when they are received until they are returned.

School Official's Signature: _____ Date: _____

Payment Information: Make payment to Louisiana High School Correspondence Courses, LLC or LHSCC by either Cashier's Check or Money order. (No personal checks accepted)

Enrollment Agreement: I have read, understand and agree to abide by the Course Guidelines provided by Louisiana High School Correspondence Courses, LLC. I understand that it is my responsibility to acquire a textbook and that my enrollment and course information, including, but not limited to lessons and exams may be shared with my school and parent/legal guardian. I understand that if I am 18 years of age or older, I must give written permission for my records to be released to my parents/legal guardian. I also agree to the terms and conditions set forth on the following page.

Student's Signature: _____ Date: _____

Parent's Name (print): _____ Parent's Signature: _____