



Kirkwood Regional Center at the University of Iowa  
 2301 Oakdale Blvd.  
 Coralville, Iowa 52241

[www.kirkwood.edu/johnsonregional](http://www.kirkwood.edu/johnsonregional)

## Kirkwood Post-Secondary Enrollment Option (PSEO) Registration Form

Before submitting this form to Kirkwood, student should:

1. Apply to earn college credit in high school at Kirkwood ([www.kirkwood.edu/earncredit](http://www.kirkwood.edu/earncredit))
2. Provide documentation of prerequisites, if required for course enrollment.
3. Meet State of Iowa Senior Year Plus Proficiency Requirements or District Approved Alternative Assessment.

### Student Information:

Last		First		M.I.	SS# or Kirkwood K#
Street Address or P.O. Box Number			City	State	Zip Code
Area Code	Phone Number	Date of Birth	Male / Female (Circle One)		
Name of High School			Anticipated Year of High School Graduation		
Parent/Guardian Name		Street Address	City	State	Zip Code

Required Student's Email Address (*required for Online Course—student will receive course info at this address*)

### Kirkwood Course you wish to register for:

*Example how to fill this portion out:*

Course Name: Introduction to Psychology Catalog/Section: PSY-111-CRF01 Synonym #: 123456

Course Name:	Catalog/Section:	Synonym #:
Course Name:	Catalog/Section:	Synonym #:
Course Name:	Catalog/Section:	Synonym #:
Course Name:	Catalog/Section:	Synonym #:

Prerequisite Information is required for enrollment in Composition, Math or Online Coursework. If student has not taken the ACT test, Compass scores must be on file at Kirkwood.

Student Placement Scores:

ACT Test Date \_\_\_\_\_

ACT Math Score \_\_\_\_\_ ACT English Score \_\_\_\_\_ ACT Reading Score \_\_\_\_\_

**\*\* Additional Information on reverse side \*\***

**Student/Parent Understanding:**

My signature authorizes Kirkwood Community College to release my confidential student information to my high school pertaining to my enrollment in Kirkwood college credit classes while a high school student.

I understand that the Iowa PSEO Act stipulates that when a grade of "F" or "W" has been assigned, my family is responsible for repaying the school district the amount of tuition not to exceed \$250 per course. I also understand that it is my responsibility to return my textbook at the end of my course to my high school guidance office, or I will incur an additional direct charge, for the full cost of the textbook.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Authorization Date (Release Valid for 12 months)

\_\_\_\_\_  
Parent/Guardian Signature (Only required for PSEO Courses)

\_\_\_\_\_  
Authorization Date (Release Valid for 12 months)

Local School District Approval for PSEO Courses must be received before Kirkwood can process this registration form. Please be sure that this form is signed by student, parent, and school official before returning to Kirkwood Community College for registration.

Name of High School

School Contact Person

Title

Phone:

I verify that the student identified on this application is eligible for participation in the PSEO Act college classes. Our school district as identified above, agrees to make payment in accordance with provisions of this Act and established Kirkwood Community College policies and guidelines relative to tuition, fees, books, and refunds in the event this student withdraws from courses.

\_\_\_\_\_  
Signature of Authorized School Official

\_\_\_\_\_  
Date

**Completed forms should be submitted to:  
Kirkwood Regional Center at The University of Iowa  
2301 Oakdale Blvd.  
Coralville, IA 52241  
Phone: (319) 358-3100  
Email: johnson.regional@kirkwood.edu**

Please note that both sides must be sent before Kirkwood Community College can register the student.

Kirkwood Community College Disposition

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved

Reason for denial \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_

Registered by - Kirkwood Representative/Office

Office Assistant – Send a copy of this form to Kate Jett