

# MATHEMATICS ENROLLMENT FORM

## Math Enrollment Form



2610 Sam Noble Pkwy  
Ardmore, OK 73401  
580-224-8374

High School: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

E-mail \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone: (580) \_\_\_\_\_ Evening: (580) \_\_\_\_\_ Cell (580) \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Technical Program \_\_\_\_\_ AM PM Grade: 11<sup>th</sup> 12<sup>th</sup>  
MM/DD/YY Circle One

Parent/Guardian Name: \_\_\_\_\_ e:mail \_\_\_\_\_

**ACADEMIC Course Requested** Please identify time requested and semester course (A - 1<sup>st</sup> Sem and B - 2<sup>nd</sup> Sem)

- ☐ 7:00 – 7:50 a.m. \_\_\_\_\_ Alg 2 A \_\_\_\_\_ Alg 2 B \_\_\_\_\_ College Algebra/Pre-Calc  
☐ 11:05 – 11:50 a.m. \_\_\_\_\_  
☐ 3:50 – 4:35 \_\_\_\_\_  
\_\_\_\_\_ Personal Finance \_\_\_\_\_ Geometry A \_\_\_\_\_ Geometry B \_\_\_\_\_ Math of Finance

### Counselor Section

This student is unable to enroll in this course on campus for the following reason: *(Please be specific--example: this student is an athlete and must attend SOTC in a.m. and science class needed is offered a.m. only)*

Counselor: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Counselor

### Student/Parent Agreement

#### Student:

1. I agree to attend the designated math class.
2. I agree to maintain adequate progress on the course assigned.

#### Parent/Guardian

3. I understand my child has been enrolled for academic math credit at Southern Oklahoma Technology Center

Parent/Guardian: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Guardian

Student: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

### Principal Agreement

#### Principal:

I agree to transcript the letter grade and course credit earned when the student course is finished.

Principal: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal