Mesabi Range College
Post Secondary Enrollment Options Program
Guidance Counselor or Home School Parent Form

Please complete the following information:

PSEO Applicant’s Name:________________________________________________________

Student’s Percentile Rank in Class:___________________________________________

Overall GPA is:_________________

*If class rank or GPA are under required levels, please provide justification for referring this student to the PSEO program. Attach a statement of justification to the application.

1. Number of high school credits needed for graduation:_________________

2. What specific areas are credits needed to graduate, (i.e., English, Social Studies, Math, etc.)

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<th>Subject</th>
<th>Credits Needed</th>
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- It takes 4 credits of MRC coursework to complete 1 high school credit.
- Textbooks purchased for this program are the property of MRC. Students are instructed to return books to their PSEO Advisor.

______________________________________________________________________________
High School Name

______________________________________________________________________________
High School Address                      City           State           Zip Code

_________________________________________________________________________
Phone Number

______________________________________________________________________________
High School Principal/Counselor or Home School Parent (Please Print)

______________________________________________________________________________
(Signature) of Principal/Counselor or Home School Parent                      Date