



Hmong College Prep Academy (HCPA) PSEO Agreement Form

Student Name:	Student Personal Email:	Part-Time Full Time (circle one)
College:	Student Cell Phone:	Grad year:

Students and parents/guardians must complete this agreement form together (return to the counseling office by 5/30/2025)

- ☐ *In order to receive an HCPA diploma, the courses taken at PSEO colleges/universities must be completed along with all other graduation requirements.. _____(initial)*
- ☐ *I understand it is my responsibility to know and understand the policies and processes of the college I am attending. This includes registering for classes, contacting professors, handling absences, and using resources when necessary. _____(initial)*
- ☐ *I am responsible for registering for the correct number of credits and classes needed to earn my high school diploma. I will provide a copy of my schedule to my PSEO counselor prior to the start of the semester. _____(initial)*
- ☐ *I understand in order to be a full-time student I need to be registered for 12 credits or more. If I am registered for less than 12 credits I will be a part-time student who will need to take class (es) at the HCPA. _____(initial)*
- ☐ *I understand that if I withdraw from a college class after the 1st 10 days of the semester an NG can be assigned to the course and will affect my GPA. _____(initial)*
- ☐ *I understand that a grade of F from my PSEO courses will be an F on my HS transcript and will negatively affect my GPA. _____(initial)*
- ☐ *I understand that I will need to meet with my PSEO counselor(s) regularly to receive current updates for HCPA students _____(initial)*

Student Signature_____ **Parent signature**_____

Counselor signature_____ **Date** _____