

2021-2022 MATC DUAL ENROLLMENT ACADEMY
COUNSELOR RECOMMENDATION

SECTION 1: STUDENT INFORMATION

Student Name: _____

Name of High School: _____

MATC DEA Choice: _____

SECTION 2: COUNSELOR RECOMMENDATION – Completed by High School Counselor

Counselor Name: _____

Counselor Email: _____ Office Phone #: _____

Will this student be in 12th grade at the start of 2021-2022 School Year: ☐ Yes ☐ No

Is this student in good academic standing, as defined by the high school, and on track to graduate: ☐ Yes ☐ No

Does this student have a cumulative GPA of 2.0 or better: ☐ Yes ☐ No

Has this student had attendance issues in the past: ☐ Yes ☐ No

If yes, are there extenuating circumstances? Please explain: _____

What graduation requirements does this student need to complete during the 2021-2022 school year?

Please list: _____

Would you recommend this student for MATC's Dual Enrollment Academy: ☐ Yes ☐ No

Additional comments: _____

COUNSELOR E-SIGNATURE – IN E-SIGNING THIS DOCUMENT, I certify the information provided on this student in this section is true and accurate.

Counselor E-Signature: _____ Date: _____

Please email completed recommendation to Erin Cherney, cherneye@matc.edu by March 31, 2021.