



Lake Sumter
State College

**DUAL ENROLLMENT SIGNATURE PAGE
FOR HOME EDUCATION STUDENT
2026-2027**

Name of Student: _____

Student Address: _____

Student Email: _____ Student Phone: _____

Home Education Program Official (HEPO) Name: _____
This can be a parent, guardian, or other individual responsible for overseeing student's educational progress.

HEPO Email: _____ HEPO Phone: _____

Please **enter your initials** for each statement to indicate that you agree to the following terms.

High School Graduation Date

The graduation date listed on the dual enrollment application indicates the end of dual enrollment eligibility at LSSC. This end date cannot be changed, even if the student's graduation date is changed at a later time.

I understand and agree to these terms.

Annual Agreement Review and Renewal

After admittance into the dual enrollment program, the student will be sent a new agreement each spring to review any changes. Student must sign and renew agreement by stated deadline to enroll the following fall.

I understand and I agree to these terms.

By signing this agreement, I certify the following:

- I am registered with either Lake County Schools or Sumter County Schools and can provide proof of registration in the dual enrollment application.
- I have read and agree to all the terms as indicated in the document titled *"DUAL ENROLLMENT AGREEMENT BETWEEN HOME EDUCATION DUAL ENROLLMENT STUDENT AND LAKE-SUMTER STATE COLLEGE DISTRICT BOARD OF TRUSTEES 2026-2027"*.

Student Name (Printed)

Student Signature

Date

HEPO Name (Printed)

HEPO Signature

Date

John Temple

LSSC President Name (Printed)

Signed by:


LSSC President Signature

6/3/2026

Date