

# Gahanna-Jefferson Public Schools

## COLLEGE CREDIT PLUS PROGRAM Checklist

Students must complete each part of this checklist in order to participate in the College Credit Plus program.

The following courses are offered at GLHS:

ENGL 1100 Composition 1  
ENGL 2367 Composition 2  
CHEM 1111 Elementary Chemistry  
SCM 1100 Supply Chain Management

POLS 1100 Intro to Government  
POLS 1250 State and Local Government  
FGMT 1101 Personal Finance

This checklist must be complete, signed, and submitted to **Mrs. Brofford** in the Counseling Office before students leave for the summer. If the form is not submitted, the CCP courses will be dropped from students' schedules.

\_\_\_\_\_ Submit the Intent to Participate form **by April 1<sup>st</sup>**.

- Please have this initialed in the Counseling Office when you turn in your form.

\_\_\_\_\_ Apply to Columbus State Community College as a CCP Student **by April 1<sup>st</sup>**.

1. Applications are completed online at: [www.cscsc.edu](http://www.cscsc.edu)
2. Applications are processed in 2-3 business days. You will receive an email confirmation with your Cougar ID number.
3. What is your Cougar ID (this is included in your acceptance email from CSCC)? \_\_\_\_\_

\*If you are planning to take courses through a different institution, you will apply with them and follow the same steps, except for sending your Cougar ID\*

\_\_\_\_\_ Submit test scores to Columbus State Community College **by June 1<sup>st</sup>**.

- SAT or ACT scores must be submitted directly to CSCC through SAT (College Board) or ACT.
- If you choose to take the ALEKS/Accuplacer Placement Test instead, it can be taken at CSCC main campus, regional testing centers (Westerville, Reynoldsburg, etc.) or at GLHS. We will host testing dates in the Spring. Watch for further information about these dates on the announcements & in school communications.

\_\_\_\_\_ Submit your **Consent to Register form** to your school counselor.

A-Car: Mrs. Falk                      Kf-Or: Mr. Miller  
Cas-Fo: Dr. Nelson Slagle          Os-Sn: Mrs. Prenoveau  
Fp-Ke: Mrs. Monnig                So-Z: Mrs. Himmel

\_\_\_\_\_ Schedule courses with your school counselor after your Intent form is submitted.

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Student Name (print)

Signature

Date

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Parent/Guardian Name (print)

Signature

Date

**For Office Use Only**

Date Received:

Received by: