

INDIAN RIVER STATE COLLEGE

Dual Enrollment Information Sharing Statement of Understanding

BACKGROUND:

	College has developed a system to share acaden		tion with
approved high scho	ools in the four-coun9 (u){lu1. First Name	Last Name	
	Work email	Work #	Cell #
	2. First Name	Last Name	
	Work email	Work #	Cell #
_	These new counselors will be replaced to the second of the	acing the counselors below who will no longenation.	er need access to the DEA
_	1. First Name	Last Name	
	Work email	Work #	Cell #
	2. First Name	Last Name	
	Work email	Work #	Cell #
_	It is understood that the information provided by IRSC is offered for the sole purpose of providing acader students and that all applicable laws and standards will be adhered to in safeguarding this information aprivacy of the students. I further agree to notify IRSC of any changes in the assignments of personnel list		
	High School Principal or Designee		Today's Date
	Phone #	Email address	