

Dual Enrollment Off-Campus / Woodbridge Promise Course Registration Form

High School / Career Tech Center Information

High School / Career Tech Center Name:		Contact Name:			Contact Phone Number:		Contact Email:		Date Completed:
Please complete the table b FerrisNow@ferris.edu and i				f-campus c	ourses your stu	udent(s) wis	h to take. You may	return the	form via email to
Student Name	Studer (if know	nt Ferris ID # n)	Course 1		Course 2		Course 3	Соц	ırse 4