



PSEO Student Registration Form

Minnesota West Tech ID# _____ School Year _____

Semester: Fall Spring Grade: 10 11 12

Test Scores:

Accuplacer ACT MCA

Reading Math Reading Math

Eligible for PSEO: Yes No

Student Name (Last, First, M.I.) _____

Street Address _____ City _____

Zip Code _____ Contact Phone Number _____ Contact Email _____

1. PSEO students are considered regular college student and required to do all the same requirements for each course as stated on each course syllabus and follow all policies of Minnesota West Community & Technical College.
2. PSEO students must access their student account, student email, and D2L site.
3. All textbooks and equipment provided to a pupil in the PSEO program must be returned to the college undamaged within 10 business days of course completion.

School District Name: _____ City: _____

School Contact Name/Signature: _____
(Print Name) (Signature) Date

Comments: _____

Parent Name/Signature of Permission _____
(Print Name) (Signature) Date

Student Signature: _____ Date _____

Minnesota West Advisor: _____ Campus _____