



EARLY ADMISSION/ DUAL ENROLLMENT REQUEST

The dual enrollment program offers high school juniors and seniors the opportunity to get a head start on their college program by allowing them to take Muskegon Community College (MCC) courses while they are still in high school. Successfully completed dual enrollment courses may be applied to a MCC program or may be used for transfer to one of Michigan's senior colleges.

As an applicant to the Dual Enrollment program, you are reminded that, if admitted to the program, you will be considered a college student while participating in the approved coursework and you will be afforded all student rights and responsibilities as outlined in the current MCC catalog.

INSTRUCTIONS: You must fill out this form for **each semester** you wish to be enrolled at MCC. The **FIRST** semester you apply for Dual Enrollment you must apply online at <http://actv.muskegoncc.edu\apply> to obtain a student number.

You, the applicant, must complete **Part 1** of this application, sign and date it. Your high school counselor or principal **must** initial each course requested, sign and date **Part 3** of the application. A parent or legal guardian **must** sign **Part 2** of the application indicating their understanding of your involvement in college coursework and the possible financial obligation as a result of you enrolling in the course or courses indicated on this application.

Part 1 - To be completed by student & high school counselor or principal.

STUDENT INFORMATION (please print clearly in blue or black ink)

_____	_____	_____
MCC I.D. # (IF KNOWN)	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)
NAME		
_____	_____	_____
LAST	FIRST	MIDDLE
MAILING ADDRESS		
_____	_____	_____
STREET NUMBER	STREET NAME	APT NUMBER OR PO BOX
_____	_____	_____
CITY	STATE	ZIP CODE
_____	_____	
HOME TELEPHONE NUMBER	E-MAIL ADDRESS	

REQUESTED SEMESTER Fall 20____(Aug-Dec) Winter 20____(Jan-May) Summer 20____

COURSES REQUESTED (subject to availability/eligibility at time of registration.)

<u>Course Name/ Number and Section #</u> <i>(Ex. MATH 115 W01)</i>	<u>Will you receive high school credit for this course?</u>	<u>MCC Course Location</u>
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____
_____	Yes <input type="checkbox"/> No <input type="checkbox"/>	_____

High School Counselor's Signature

SCHOOL CURRENTLY ATTENDING

SCHOOL NAME _____ YOUR CURRENT GRADE LEVEL 12 11 10

STREET ADDRESS _____ TELEPHONE NUMBER _____ EXPECTED GRADUATION DATE (MM/YYYY) _____

I hereby make application to the MCC Dual Enrollment program. I understand my rights and responsibilities as a student of MCC. I authorize that my course progress including course grades to date, attendance, and final course grade(s) for the course(s) I enroll in will be made available to my high school principal and/or counselor upon request.

STUDENT'S SIGNATURE (Do not print) _____ DATE _____

Part 2 - To be completed by parent or legal guardian.

Your son or daughter is requesting approval to enroll in college coursework at MCC. Please read the following and sign your name indicating your understanding and agreement with the statement.

I understand that the student and his/her parent or guardian is responsible for payment of any tuition and expenses that the high school has not specifically agreed to cover. I understand that my child intends to enroll in a college course. While enrolled he/she will be afforded all the rights and responsibilities provided to all other college students. I understand that my child will be required to meet all the attendance and classroom participation requirements expected of all other college students. My child and I agree to become familiar with college policies covering tuition refund, course withdrawal, class attendance and campus standards of conduct outlined in the MCC catalog. I understand that information regarding my son/daughter's course progress, attendance, and final grade(s) in class may be shared with the principal or counselor of his or her high school.

*****Be advised that courses taken to fulfill high school graduation requirements will not be accepted at the University of Michigan, Michigan State University or Wayne State University.**

PARENT/LEGAL GUARDIAN'S NAME (please print)

LAST _____ FIRST _____ MIDDLE _____ RELATIONSHIP _____

Parent or Legal Guardian Signature _____

Date _____

Part 3 - To be completed by high school counselor or principal.

SCHOOL NAME _____

CITY/STATE/ZIP CODE _____

FAX NUMBER _____

E-MAIL _____

Please check and complete the section below that applies to the applicant.

- The student is eligible for the "Dual Enrollment" program as mandated by the Michigan state-aid authorization and is approved to take the courses at MCC listed on the front of the form. The school will pay for:
 - Tuition and student fees
 - Books

- The student is **not** eligible for "Dual Enrollment" but is approved to take the courses at MCC listed on the front of this form. Tuition and other expenses will be paid by the student and/or parent or guardian.

- This student is **not** eligible for "Dual Enrollment" but is approved to take the courses at MCC listed on the front of this form. The student must pay for tuition and student fees.
 - The school will pay for books.
 - The student will pay for books.

Principal or Counselor

Principal or Counselor Signature

Date

ELIGIBILITY AUTHORIZATION (FOR DESIGNATED SCHOOL OFFICIAL ONLY)	
The course(s) will be used to complete High School diploma requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Authorized Dual Enrollment School Stipend \$ _____
The Applicant is authorized for approval in the following program (circle only one)	
<input type="checkbox"/> Home School <input type="checkbox"/> Talented Youth <input type="checkbox"/> High School Guest <input type="checkbox"/> Michigan Dual Enrollment	
_____ SCHOOL OFFICIAL'S NAME (PRINT OR TYPE)	
_____ DATE	
_____ SIGNATURE	
_____ DATE	
COLLEGE USE ONLY	
_____ COLLEGE OFFICIAL'S APPROVAL	
_____ DATE	