



Office of Admissions
 3000 North Stiles Road
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Dual Enrollment Registration Request Form

The Dual Enrollment program offers high school students the opportunity to get a head start on their college program by allowing enrollment in West Shore Community College courses while they are still in high school. Successfully completed Dual Enrollment courses may be applied to a WSCC 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 course(s), and you will be afforded all student rights and responsibilities as outlined in the current WSCC catalog.

INSTRUCTIONS: You must complete a Dual Enrollment application for EACH SEMESTER you wish to be enrolled at WSCC. Your FIRST Dual Enrollment application must be submitted after completing the online admissions application on our website (www.westshore.edu), submitting test scores and completing the online orientation.

In order to be eligible for admission while in high school, you must submit passing ACT (18 - English and 17 - Reading) or SAT (450 - Reading/Writing) or COMPASS (74 - Writing and 76 - Reading) scores. You must also meet all pre-requisite requirements listed for a course in which you wish to enroll.

STUDENT: Must complete Part 1 of this form, sign and date form. Student must complete an admissions application online (done only once as dual enrolled) and must complete the online orientation in order to register for courses.

PARENT/LEGAL GUARDIAN: Must read the information in Part 2 of the form indicating your understanding of the student's involvement in college course work and understanding the possible financial obligation as a result of the student's enrollment for all courses on this form; sign and date form.

HIGH SCHOOL COUNSELOR OR PRINCIPAL: Must complete Part 1 of the form with student; must complete Part 3 of this form and sign and date.

PART 1 - TO BE COMPLETED BY STUDENT AND HIGH SCHOOL COUNSELOR OR PRINCIPAL

Personal Information:

| | | | | | | | | | |
|----------------|------------|--|--|--|--|---------------|--|----------------|--|
| Social Sec. No | ### - ## - | | | | | Date of Birth | | WSCC ID# | |
| Last Name | | | | | | First Name | | Middle Initial | |
| Address 1 | | | | | | Address 2 | | Apt. Number | |
| City | | | | | | State | | Zip Code | |

High School Information:

| | | | | | | | |
|------------------|--|--|--|--|--|-----------------|--|
| High School Name | | | | | | Current Grade | |
| Test Completed | <input type="checkbox"/> ACT (18-English & 17-Reading) <input type="checkbox"/> SAT (450-Reading/Writing) <input type="checkbox"/> COMPASS (74-Writing & 76-Reading) | | | | | Graduation Year | |

Semester for which I am applying: Fall 20 ____ Winter 20 ____ Summer 20 ____

| Course Dept. | Course No. | Course Section | Course Title | High School Credit (circle one) | | Paid for by School District (circle one) | |
|--------------|------------|----------------|--------------|---------------------------------|----|--|----|
| | | | | YES | NO | YES | NO |
| | | | | YES | NO | YES | NO |
| | | | | YES | NO | YES | NO |
| | | | | YES | NO | YES | NO |
| | | | | YES | NO | YES | NO |

I hereby submit this Dual Enrollment Form and I understand my rights and responsibilities as a student at WSCC. 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 and at the end of the semester.

Student Signature: _____

Date: _____

West Shore Community College is an equal opportunity/affirmative action institution.

PART 2 - TO BE COMPLETED BY PARENT OR LEGAL GUARDIAN

Your son or daughter is requesting approval to enroll in college course work at West Shore Community College. Please read the following and sign your name indicating your understanding and agreement with the statement below.

I understand that the student and his/her parent or guardian are responsible for payment of 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 or she will be afforded all the rights and privileges 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. The student is protected by the Federal Educational Rights and Privacy Act.

My child and I agree to become familiar with college policies covering tuition refund, course withdrawals, class attendance and campus standards of conduct outlined in the WSCC catalog. I understand that information regarding my son's or 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 upon request and at the end of the semester. I also understand that the student is protected by the Federal Educational Rights and Privacy Act, so legally the student's educational information cannot be shared with a parent and/or legal guardian unless a Third Party Release Form is completed in the Student Services Office.

***Be advised that courses taken to fulfill high school graduation requirements may not be accepted at the University of Michigan or Michigan State University. Please see a WSCC advisor for more information.*

Parent or Legal Guardian Signature _____

Date _____

PART 3 - TO BE COMPLETED BY HIGH SCHOOL COUNSELOR OR PRINCIPAL

Please complete Section A, B, or C below:

SECTION A This student is eligible for the Dual Enrollment program as mandated by the Michigan state-aid authorization and is approved to take the courses at WSCC listed on the front of this form. The school will pay for:

TUITION AND STUDENT FEES

BOOKS

SECTION B This student is NOT eligible for Dual Enrollment but is approved to take the courses at WSCC listed on the front of this form. Tuition and other Expenses will be paid by the student and/or parent or legal guardian.

SECTION C This student is NOT eligible for Dual Enrollment but is approved to take the courses at WSCC listed on the front of this form. The school will pay for:

TUITION AND STUDENT FEES

BOOKS

Principal or Counselor Signature _____

Date _____

IMPORTANT NOTE: YOU MUST SUBMIT PASSING ACT, SAT, OR COMPASS SCORES IN ORDER TO ENROLL IN ANY COLLEGE COURSE WHILE YOU ARE IN HIGH SCHOOL.

Please return completed Dual Enrollment Application to: OFFICE OF ADMISSIONS
WEST SHORE COMMUNITY COLLEGE
3000 NORTH STILES ROAD
SCOTTVILLE, MICHIGAN 49454
FAX - 231-845-3944
EMAIL - admissions@westshore.edu

FOR OFFICE USE ONLY

Processing Date _____ Student Services Staff Initials _____

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