

APPLICATION FOR DUAL ENROLLMENT STUDY

This application form is for part-time non-degree high school dual enrollment study and is not an application for a degree program. Students who desire to enroll in a degree program must apply using the regular application form and process. No application fee is required to submit a part-time application.

The following items must be submitted to complete the application file

- Application for Dual Enrollment Study
- Official high school transcript
- Letter of recommendation concerning dual enrollment from guidance counselor

NAME: _____
First Middle Last

ADDRESS: _____
Street/P.O. Box/Rural Route

City State Zip

PRIMARY PHONE: (____) _____ Home Cell
SECONDARY PHONE: (____) _____ Home Cell

E-MAIL ADDRESS: _____
If more than one, list preferred

BIRTH DATE: ____/____/____ SOCIAL SECURITY NUMBER: ____-____-____

ETHNICITY: _____ CITIZENSHIP: _____

HIGH SCHOOL CURRENTLY ATTENDING: Public Private Home YEAR OF GRADUATION: 20____

NAME OF SCHOOL: _____

ADDRESS OF SCHOOL: _____
Street/P.O. Box/Rural Route

City State Zip

NAME OF GUIDANCE COUNSELOR: _____

CONTACT PHONE NUMBER: (____) _____

IN WHICH SEMESTER DO YOU PLAN TO ENROLL? Fall 20____ Spring 20____

FOR HOW MANY CREDIT HOURS WILL YOU BE ENROLLING? _____

HAVE YOU PREVIOUSLY EARNED ANY COLLEGE CREDITS? Yes No If yes, how many? _____

NAME OF COLLEGE / UNIVERSITY WHERE PREVIOUS CREDIT WAS EARNED: _____

Provide a brief statement of your educational objectives and reason(s) for dual enrollment. Please enclose with application.

I certify that I am familiar with the standards and expectations for student conduct at Messiah College as summarized in the College catalog online or expressed in the Community Covenant (Student Handbook — http://www.messiah.edu/offices/studentaffairs/student_handbook/). If admitted as a student, I agree to abide by these guidelines. I also certify that the information I have provided on this application is complete and accurate.

Signature _____ Date _____

PARENT PERMISSION: My son/ daughter _____ has my permission to pursue dual enrollment study at Messiah College.

PARENT SIGNATURE: _____ PRINT: _____

RELATIONSHIP TO STUDENT: _____ PHONE: (____) _____

If parent is a Messiah College employee, please indicate name: _____

Messiah College does not discriminate on the basis of gender, race, color, age, disability, or national or ethnic origin in the administration of its educational policies, scholarship and loan programs, and athletic or other College-administered programs. Messiah College does reserve the right to revoke admission or readmission in the event of an applicant's misrepresentations in any phase of the application process.