Dual Enrollment Program
Enrollment Permission

First time dual enrollment students must complete an official college admission application and this form to be eligible.

1. To Be Completed by Student

Full Name_____________________________________________________________________________________________________

Student Phone Number_________________________________________ Parent Phone Number_______________________________

High School ___________________________________________________________________________________________________

* If 18 or over, proof of US citizenship is required. A clear copy of student valid driver’s license will suffice.

Requirements for Dual Enrollment

- Must have junior or senior standing in high school and a letter grade average of at least a “B” or a numerical grade average at least 88 (3.0 on four point scale) or an ACT Composite of 21. 
  Note: High Schools may require a higher GPA for participation in the program.

- Student must present minimum sub-scores to enroll in the following college level courses as stated in the college catalog: (Example: ENGL 1010, student must have both an English sub score of 18 and Reading sub score of 19).

- Student must complete English 1010 (Comp I) with a passing grade or present valid Advanced Placement (AP) scores to WSCC in order to proceed to English 1020 (Comp II).

- Dual Enrollment students must have courses verified for high school credit by the high school counselor using the form below each semester.

2. To Be Completed by High School Counselor/Principal

(Copy of Transcript and ACT/PLAN must be attached regardless of course(s) student wishes to register)

Counselor/Principal Signature ______________________________________ Date __________________________________________

I am a SAILS completer (passed 5 modules) ☐ Yes ☐ No

3. Course Registration Section (CURRENT SEMESTER ONLY)

Year _____________ Term ______________________ (Ex. SP, FA, SU)

<table>
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<tr>
<th>High School Period</th>
<th>Subject</th>
<th>Section No.</th>
<th>CRN</th>
<th>Date Reg.</th>
<th>DEG Course #</th>
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Have the following been included?

☐ Transcripts ☐ ACT scores ☐ Drivers license (only if over 18)

Walters State Office Use ONLY

ACT ASPIRE ACCUPLACER Date Taken GPA

English _____ Math _____ Reading _____ Science _____ Composite _____

Have you taken another dual enrollment course (s) from another institution?

☐ Yes ☐ No

Counselor Use ONLY (if needed)

Received in Counseling Office on ________ at __________

Date Time
4. To Be Completed by Student

I understand by becoming a Dual Enrollment student, I must abide by the high school's and the college's rules and regulations. In acknowledgment of the Family Educational Rights and Privacy Act of 1974 (FERPA), I give Walters State Community College permission to release any information regarding my grades, attendance, academic standing, disciplinary action, financial obligations, or any other aspect of my student life to my parents or legal guardians while I am a dual enrollment student. I understand grades, attendance, classroom behavior and any other academic information will be provided to the high school as part of this agreement. I have also read and understand the Financial Responsibility Statement located within the Dual Enrollment packet and agree to the terms and conditions set forth in this statement.

Student’s Signature _________________________________________________ Date ____________________________________________

5. To Be Completed by Parent/Guardian

Applications for the TN Dual Enrollment Grant must be submitted online for each semester funds are requested. You may access the TN Dual Enrollment Grant at tn.gov/content/tn/collegepays/tsac-student-portal.html

STUDENTS MUST MAINTAIN A CUMULATIVE 2.75 COLLEGE GPA TO MAINTAIN THE DUAL ENROLLMENT GRANT FOR ADDITIONAL SEMESTERS.

MUST check ONE of the following:

☐ I wish for my student to receive grant funding for one course per term.
☐ I wish for my student to receive grant funding for more than one course per term.
☐ I do not wish for my student to receive funds from the Dual Enrollment Grant.

If you choose not to receive funds from the Dual Enrollment Grant, you may not be eligible for other types of scholarships/awards that may require participation in the Dual Enrollment Grant program.

Please be aware once you exceed $1,200 from the Dual Enrollment Grant Awards, the additional funding will be deducted from the first year HOPE Scholarship Award, if desired. For more information regarding this policy, please visit tn.gov/content/tn/collegepays/tsac-student-portal.html.

The award amounts at eligible two-year institutions are as follows: (3 Course Maximum per Semester)

- Up to $500 .....................................Course #1
- Up to $500 .....................................Course #2
- Up to $200 .....................................Course #3
- No Award .....................................Course #4
- Up to $300 per credit hour ..............Course #5
- Up to $300 .....................................Course #6
- Up to $300 .....................................Course #7
- Up to $300 .....................................Course #8
- Up to $300 .....................................Course #9
- Up to $300 .....................................Course #10

MUST check ONE of the following:

☐ If my student exceeds the $1,200 allowed from the Dual Enrollment Grant, I DO want to deduct from the first semester of my HOPE Scholarship
☐ If my student exceeds the $1,200 allowed from the Dual Enrollment Grant, I DO NOT want to deduct from the first semester of my HOPE Scholarship.

Note: If you select this option, you elect NOT to receive any DEG funds and you are responsible for the full tuition amount.

Please note you are responsible for the cost of textbooks and any additional course fees.

I have also read and understand the Financial Responsibility Statement and agree to the terms and conditions set forth in this statement located within the Dual Enrollment Student/Parent Handbook.

Print Legal Parent/Guardian Name __________________________________________________________________________________

Parent’s Signature ___________________________________________________Date ____________________________________________