## **Dual Enrollment / Dual Credit Application**

MAILING ADDRESS  CITY STATE ZIP COUNTY  TELEPHONE  HOME PHONE  EMAIL  GENDER	NAME													
MAILING ADDRESS  CITY STATE ZIP COUNTY  TELEPHONE  HOME PHONE  EMAIL  GENDER	1071012	LAST	FIRST			MIDDLE			PREFERRED NAME					
ADDRESS  CITY STATE ZIP COUNTY  TELEPHONE  HOME PHONE  CELL PHONE  EMAIL  GENDER	MAILING	STREET ADDRESS												
TELEPHONE  HOME PHONE  CELL PHONE  CITY  CELL PHONE  CELL PHONE  CELL PHONE  CITY  CELL PHONE  CELL PH														
HOME PHONE   CELL PHONE		CITY	STATE	STATE			ZIP			COUNTY				
HOME PHONE   CELL PHONE	TELEPHONE													
Are you a U.S. Citizen?   YES   NO   Are you a permanent U.S. resident?   YES   Description   YES   The term in which you expect to enroll for Dual Credit:   PAES   DATE OF BIRTH   YES   DATE OF B					CELL P				HONE					
Are you a U.S. Citizen?	EMAIL													
If no, what Visa do you hold?	GENDER	□МА		☐ FEMALE			DATE OF BIRTH			//				
If no, what Visa do you hold?											I			
(If you have permanent residency, a copy of your permanent residency card is required to attend college.)  What is your native language?  ETHNICITY (optional)  African American   American Indian/Alaskan Native   Asian   Native Have Pacific Islander   Hispanic Caucasian   Other  EMERGENCY CONTACT  NAME  PHONE  CITY  STATE   ZIP  NAME OF HIGH SCHOOL   CITY   STATE   ZIP  NAME OF HIGH SCHOOL   CITY   STATE   CITY   STATE   CITY   STATE   CITY   STATE   CITY   CIT	Are you a U.S. Citize	en?	☐ YES	□ NO Ar		Are	you a permanent U.S. resid			dent?	t?		□ NO	
What is your native language?  ETHNICITY (optional)  African American   American Indian/Alaskan Native   Asian   Native Have   Pacific Islander   Hispanic Caucasian   Other  EMERGENCY CONTACT  ADDRESS  CITY  STATE  Do you plan to be a mid-term graduate at your high school?  The term in which you expect to enroll for Dual Credit:  Do you have any college hours completed?  PHONE  STATE  Do you plan to be a mid-term graduate at your high school?  FALL 20_ SPRING 20_ SUMM  If yes, how many hours have you completed?	If no, what Visa do y	you hold?		If no, what is birth country?					th country?					
ETHNICITY (optional)  African American   American Indian/Alaskan Native   Asian   Native Have Pacific Islander   Hispanic Caucasian   Other  EMERGENCY CONTACT  ADDRESS  CITY  STATE  INDIANAL PHONE  CITY  STATE  INDIANAL PROBLEM   STATE  INDIANAL PROBLEM   PHONE  CITY  STATE  INDIANAL PROBLEM   PHONE  CITY  STATE  INDIANAL PHONE	(If yo	u have permaner	t residency,	а сору о	f your per	mane	nt resi	dency ca	rd is required to	atten	d college.)			
EMERGENCY CONTACT  NAME  ADDRESS  CITY  STATE  The term in which you expect to enroll for Dual Credit:  Do you have any college hours completed?  NAME OF HISPANIC Caucasian Other  PHONE  CITY  STATE  TO  STATE  PHONE  CITY  STATE  STATE  PYES  STATE  FALL 20  SPRING 20  SUMM  STATE  SUMM  STATE  SPRING 20  SUMM  NAME OF COLLEGE  NAME OF COLLEGE  NAME OF COLLEGE  SPRING 20  SUMM  STATE  STATE  FROM (DATE)  TO	What is your native	language?												
NAME OF HIGH SCHOOL  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  The term in which you expect to enroll for Dual Credit:  Do you have any college hours completed?  Do you have any college hours completed?  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  FALL 20 SPRING 20 SUMM  Do you have any college hours completed?	ETHNICITY (optional)			☐ African American ☐ American Indian/Alaskan Native ☐ Asian ☐ Native Hawaiian ☐ Pacific Islander ☐ Hispanic Caucasian ☐ Other									awaiian	
NAME OF HIGH SCHOOL  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  The term in which you expect to enroll for Dual Credit:  Do you have any college hours completed?  Do you have any college hours completed?  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  FALL 20 SPRING 20 SUMM  Do you have any college hours completed?														
NAME OF HIGH SCHOOL  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  The term in which you expect to enroll for Dual Credit:  Do you have any college hours completed?  Do you have any college hours completed?  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  FALL 20 SPRING 20 SUMM  Do you have any college hours completed?														
NAME OF HIGH SCHOOL  CITY  STATE  ZIP  NAME OF HIGH SCHOOL  CITY  STATE  Do you plan to be a mid-term graduate at your high school?  The term in which you expect to enroll for Dual Credit:  FALL 20 SPRING 20 SUMM  Do you have any college hours completed?  NAME OF COLLEGE  NAME OF COLLEGE  CITY  STATE  FROM (DATE)  TO		NAME				PHON		NE						
NAME OF HIGH SCHOOL  GRADUATION YEAR  Do you plan to be a mid-term graduate at your high school?  The term in which you expect to enroll for Dual Credit:  FALL 20_ SPRING 20_ SUMM  Do you have any college hours completed?  NAME OF COLLEGE CITY STATE FROM (DATE) TO		100000							ATE					
GRADUATION YEAR       Do you plan to be a mid-term graduate at your high school?       □ YES       □         The term in which you expect to enroll for Dual Credit:       FALL 20		ADDRESS					CITY			SIAIE		ZIP		
The term in which you expect to enroll for Dual Credit:  Do you have any college hours completed?  SPRING 20 SUMM  If yes, how many hours have you completed?  NAME OF COLLEGE  STATE  FROM (DATE)  TO	NAME OF HIGH SCH	IOOL			CITY					STA	ATE			
Do you have any college hours completed?	GRADUATION YEAR								□ YES		□ NO			
NAME OF COLLEGE CITY STATE FROM (DATE) TO	The term in which y	nroll for D	oll for Dual Credit:			FALL 20			SPRING 20		SUM	IMER 20		
COLLEGE(S) ATTENDED  NAME OF COLLEGE  CITY  STATE  FROM (DATE)  TO	Do you have any college hours complete				□ YES □ NO									
COLLEGE(S) ATTENDED NAME OF COLLEGE CITY STATE FROM (DATE) TO														
COLLEGE(3) ATTENDED	COLLEGE(S) ATTENI	NAME OF COLLEGE			CITY				STATE	FR	FROM (DATE)		O (DATE)	
	COLLEGE(S) ATTENL	DED												
NAME OF COLLEGE CITY STATE FROM (DATE) TO		NAME OF COLLEGE			CITY			STATE		FR	FROM (DATE)		O (DATE)	
Have you been immunized against:   MEASLES?   □ YES   □ NO   RUBELLA?   □ YES			MEASLES?		☐ YES			ON [	RUBELLA?		☐ YES		□ NO	
Missouri Southern State University and Crowder College do not discriminate on the basis of sex, race, creed, color, national disability, or age in their educational programs or activities. For further information concerning disability accessibility, con Disability Services Coordinator.  Signature  Date	disability, or age in the Disability Services Cod	eir educational <sub>ا</sub>		_	ies. For f	urthe								

## **Innovation Campus Program Application for Admission**

The student and his/her parent/quardian must sign this form in order for the student to be enrolled in a dual credit course.

The studen		. ( 2		N.	cinonea in a dadi ci care co	ui sc.			
•	nrolled in Dual Credit or Dual Enrolled courses be	etore?	Yes	No					
ii 30, picasc									
Include a bi	rief statement of how receipt of this grant will he	lp you obt	tain you	r educational goals	::				
Student	Certification								
By signing	below, I certify that I understand and will abi	de by the	follow	ing statements:					
becom	The grade(s) I receive for the dual credit course(s) I tak become a permanent part of my university or commu college transcript.			portion of a course at any time during the semester, it is my responsibility to notify the Missouri Southern State University and/or Crowder College Dual Credit Coordina					
	on and fees up to \$7,500 will be covered by the f selected for the Innovation Campus grant).		l must	abide by the Misso	ol counselor's office. • Missouri Southern State University and/				
If not a be cost parent,	my		ines for dropping or withdrav qualify for any refund of fees cript.						
textbo	textbook costs for each course taken if not accepted a grant recipient.		My high school and Missouri Southern State University and/ or Crowder College may share copies of and information						
■ If I with	draw from the university or community college		regarding my official academic and attendance records.						
Student Sig	nature	Soc. Sec.	#		Date				
Parent C	ertification								
By signing	below, I certify that I understand and will abi	de by the	followi	ing statements:					
will be	nde(s) my child receives for the dual credit course come a permanent part of my child's university o unity college transcript.		Southe	ern State University	ity to notify the Missouri or Crowder College Dual Cre school counselor's office.	dit			
	I tuition and fees up to \$7,500 will be covered by the rant (if selected for the Innovation Campus grant).		Univer	sity and/or Crowde	nust abide by the Missouri Southern State and/or Crowder College deadlines for dropping wing from a course in order to qualify for any ees or to receive a "W" on my transcript. high school and Missouri Southern State and/or Crowder College may share copies of nation regarding his or her official academic and				
If not accepted to the Innovation Campus grant, there may be costs associated with taking a dual credit course. I, or my child, may be responsible for tuition, fees, and textbook costs for each course taken if not accepted as a grant recipient.									
			Univers	sity and/or Crowde ormation regardin					
			attend	ance records.					

Date

Parent Signature