



SC Student ID: _____

High School: _____

Term: Fall 20____ Spring 20____ Summer 20____

Dual Enrollment Registration Form

An application for admission must be on file to be eligible to register for classes. This Dual Enrollment registration form must be submitted each term for dual credit and completed by the student and signed by all appropriate parties.

I. Personal Information

Legal Name: _____
Last First Middle Preferred Name

Mailing Address: _____
Number & Street or PO Box City State Zip Code

Date of Birth: _____ Phone: _____ Home/Cell Personal Email: _____

II. Approved Course Selection

- Students must satisfy all course prerequisites and provide placement test scores where needed. Registration cannot be processed unless documentation of scores is attached or on file at the College.
- All students using this registration form will follow the College's official timelines, catalog, policies, and procedures.

Dual Courses

Course Number (ex: POLS 1000.01)	Course Title:	Instructor:	Times:	Credit Hours

TEST SCORES / PREREQUISITES

ACT: Math: _____ Reading: _____	Accuplacer: Math: _____ Reading: _____	Prerequisite Met: _____ For course: _____ For course: _____
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Important Information**Adding or Dropping Courses**

- Once you have registered for any course(s) and then find you must adjust your schedule by dropping a course(s), you need to complete the High School Course Management Form (drop & refund deadlines will apply).
- The High School Course Management form is available through your high school counselor or your Sheridan College Advisor.
- If you are registered in a dual credit course, all forms must be signed by a high school counselor.
- If you are under the age of 18, or a home school student, all forms must be signed by a parent or guardian.
- Depending on when a drop is requested, there may be a "W" grade on your college transcript.
- All grades earned through Dual Enrollment courses will become a part of your permanent college record. D, F, and W grades may impact your future eligibility for federal or other financial aid.
- Visit our website for more information on Sheridan College policies and procedures:
<https://www.sheridan.edu/about/board-of-trustees/policies-procedures/>

Approval (Must Be Completed)

By signing below, I, the student, authorize NWCCD to release information to my high school. I understand that information may be released orally, electronically, or in the form of copies of written records. I understand that if I do not participate during the first week of classes, I will be dropped from my class(es). I understand that any misrepresentation of the facts may result in the immediate cancellation of the student application or registration.

Student Signature**Date**

Please be advised that college-level courses offered by this institution include material that is academically rigorous and may address complex, sensitive, or mature themes. These courses are designed for adult learners. The student will be completing the same college-level curriculum and assessments required by the course(s) identified. No modifications will be provided. All college courses become part of the student's permanent college record/transcript.

Your student is requesting to register for a college course. By signing below, you provide your agreement that your student has your permission to register for a college course(s).

Parent / Guardian Signature – (if student is under 18 years of age)**Date**

The undersigned high school official hereby approves of this student enrolling in the course(s) listed on this form and certifies that the student meets the requirements for enrollment. Course(s) "shall be counted towards the graduation requirements of the district" and "shall be made a part of the participating student's records maintained by the district." (Wyoming statute 21-20-201)

High School Counselor/Administrator Signature**Date****Office Use Only****Business Office:**

Processed Billing:

Initials:

Date: