



## Statement of Eligibility for Dual Enrollment for Dual Credit Students

Your acceptance to the Dual Enrollment for Dual Credit program at Southern Union State Community College will be official only upon the receipt of a completed Dual Enrollment Admissions Packet which includes an online Application for General Admission, a valid photo ID, ACT and/or ACCUPLACER Placement results (if applicable) and this form, completed and signed by the counselor and principal of your local high school.



### This section is to be completed by the Student.

Program of Interest:  Academic  Technical  Health Sciences Program of Study

SUSCC Student Number \_\_\_\_\_

Name \_\_\_\_\_  
Last Name First Name Middle Name

Address \_\_\_\_\_ Zip \_\_\_\_\_  
City/State

Parent/Legal Guardian Name (please print) \_\_\_\_\_

### This section is to be completed by the Student and Parent/Guardian.

#### Authorization for Release of Records

According to the Family Educational Rights and Privacy Act of 1974 (FERPA), all rights of access to students' educational records transfers from the parent(s) to the student when the students become 18 years of age OR are enrolled in an institution of postsecondary education. In order to comply with the requirements of FERPA, Southern Union State Community College shall obtain written consent from students before disclosing any personally identifiable information from his/her educational records.

As a participant of the Dual Enrollment for Dual Credit program, I understand that it is the responsibility of Southern Union State Community College to release my grades to my high school and/or secondary educational entity. My signature below authorizes the College to release the information noted in this section.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### This section to be completed by the High School Counselor and Principal or CTE Program Representative

This student is enrolled in the  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup> grade at \_\_\_\_\_ High School. Student has a minimum cumulative GPA of 2.5 (unweighted). I hereby recommend that this student be admitted to the Dual Enrollment for Dual Credit program at Southern Union State Community College. (HS Transcript must be attached for NEW dual enrollment students.)

Check One:  Fall Semester  Spring Semester  Summer Semester

Southern Union Course	Credit Hours	Equivalent High School Course	High School Carnegie Credit(s)

Counselor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

#### For College Use Only

Student has been cleared for registration.

Verified by: \_\_\_\_\_ Date: \_\_\_\_\_