

GRCC Dual and Concurrent Enrollment Application

Applications and transcripts are best received by the following dates to increase class selection opportunities:

- For fall semester by April 15
- For winter semester by October 15
- For summer semester by February 15

(For office use only.)

Student ID Number: _____

PERSONAL INFORMATION (Please print.)

Last Name: _____ First Name: _____ Middle Initial: _____

Date of Birth (MM/DD/YYYY): _____ Gender: Female Male

Street Address: _____

City: _____ State: _____ Zip: _____

How long have you lived at this home address (above)? Since (MM/YYYY): _____ County of Residence: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email Address: _____

Are you Hispanic or Latino?: Yes No

If not Hispanic or Latino, select your predominant ethnic background. (Used for reporting purposes only, not used in the admissions process.):

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

EDUCATIONAL INFORMATION

In what high school are you currently enrolled?: _____ Date of Graduation (MM/YYYY): _____

When do you plan to begin taking college classes?: Fall 20____ Winter 20____ Summer 20____

What courses are you interested in taking?: _____

REQUIRED SIGNATURES

The Academic Outreach Office recommends high school students enroll in courses without prerequisites listed in the college catalog. Students may be blocked from registration if a prerequisite has not been met. If a student enrolls in a class that is not approved by the high school, he or she is responsible for the tuition and fees associated with the course.

I certify that all the answers on this application are complete and accurate to the best of my knowledge. I understand that falsifying any part of this application may result in cancellation of admission and/or registration. I agree to become knowledgeable about GRCC's rules and regulations and abide by them. I understand that I am responsible for ALL tuition and charges related to attending GRCC if course(s) is not approved by the school district. I understand that I am responsible for ALL tuition and charges related to attending GRCC if I fail to successfully complete my course(s). GRCC may release my academic records to my high school.

Student's Signature: _____ Date: _____

Parent's or Guardian's Signature: _____ Date: _____

I understand that by signing this form I am giving the above student permission to enroll in the college course(s) at Grand Rapids Community College.

Counselor's Signature: _____ Date: _____