

Dual Credit Course Registration

All fields are required in order to process

lame: Last Name			Legal First Name		Middle Name	
ddress:						
ity:			State:	Zip Code:		
NUID:NUID was generated wi			Personal Email Addre	:ss:		
hone: Cell:		High School:				
Graduation Date	•	Cumul	ative GPA:	Class Rank (if	available)	
lighest ACT Sco	ores: Comp	osite ACT	Mat	h Sub-Score		
Course Selection	n: 🗆 Fall	☐ Spring Y	ear:			
Department	Course #	Section #		Title		Credit Hours
higher, 20 ACT scor		f class; or be recomme	in dual credit courses: junior or ser nded by high school academic staf			
Required Signati	ures					
School Counselor	approves GPA, c	ass rank and ACT	scores as accurate and mee	t the requirements stat	ed above.	
Signature of High School Counselor			Printed Name o	Printed Name of School Counselor		
I approve my son/o for tuition paymen	-		t course(s) through Wayne S	tate College and will as	ssume financial re	sponsibilit
				Printed Name of Parent		

first time for a WSC dual credit course.

□ Check if you are eligible and have applied for an ACE Scholarship. First time students are still required to pay the \$15 matriculation fee. (If you are denied the ACE Scholarship, it is the student's responsibility to pay all tuition fees to Wayne State College or cancellation of registration will occur.)

Dual Credit Program contact information: Judith Scherer Connealy Phone: 402-241-6406 Fax: 402-241-6440 E-mail: juscher1@wsc.edu

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