

Del Mar College

Dual Credit Program Application 2011 - 2012

Social Security Number _____		
Last Name _____	First _____	Middle _____
Name of High School _____		<input type="checkbox"/> Junior <input type="checkbox"/> Senior
Fall 2011 Dual Credit Course(s)		Spring 2012 Dual Credit Course(s)
1. _____	1. _____	
2. _____	2. _____	
Students must meet additional criteria to take more than two dual credit courses per semester Current GPA _____		
3. _____	3. _____	
4. _____	4. _____	
5. _____	5. _____	
<i>In signing this application, I agree to abide by the rules and policies governing the Dual Credit Program in the contracted agreement between the Independent School District (ISD) and Del Mar College. I authorize the release of grades between the Independent School District (ISD) and Del Mar College.</i>		
Signature of Student Applicant _____		Date _____
Signature of Parent/Guardian _____		Date _____

Registration dates for Fall 2011	Registration dates for Spring 2012
April 11 - August 24, 2011	November 7 - January 10, 2012
<i>Payment Deadline: August 24, 2011</i>	<i>Payment Deadline: January 10, 2012</i>

TO BE COMPLETED BY COUNSELOR	
<i>The student has met all ISD eligibility requirements; therefore, this application is approved by:</i>	
High School Counselor's Signature _____	Date _____
Principal's Signature _____	Date _____

Del Mar College Registrar's Signature _____	Date _____
Del Mar College Provost and Vice President of Instruction Signature _____	Date _____
(approval needed for more than two classes per semester)	

Copy of student's transcript, test scores, and Del Mar College application are to be attached.