

DUAL ENROLLMENT PROGRAM

Northwest Tri-County Intermediate Unit – Regional Choice Initiative (RCI)

APPLICATION FOR ADMISSION

(*Required fields – Please complete all required fields)

Student Name* _____ (First, Middle, Last)	Soc. Sec. No.* _____ - _____ - _____
Student Address* _____ Street Address, City, Zip	
Black/African American <input type="checkbox"/> Am Indian/Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> White/Non Hispanic <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of Birth* _____	
<input type="checkbox"/> Wheelchair needs <input type="checkbox"/> IEP accommodations	
Home Phone* _____ Alt. Phone _____	High School you attend* _____
Grade Level* 9 th <input type="checkbox"/> 10 th <input type="checkbox"/> 11 th <input type="checkbox"/> 12 th <input type="checkbox"/> (2010-11 School Year)	School District of Residence* _____

Parent/Guardian Name* _____	Day Phone* _____
	Alt. Phone* _____

 Parent/Guardian Signature*

 Date

*My signature indicates that the above information is accurate, and I support enrollment of my child in the Dual Enrollment Program. I also understand that on occasion students may travel via school bus to university library, technology lab, etc.

COURSE REQUEST

FALL

SPRING

Course Name

Course #

Course Name

Course #

1. _____

2. _____

Alternate* _____

Alternate* _____

*Please list alternate courses in case you don't receive your first choice

Schedule approved by home school:

 School Contact Person*