



Statement of Eligibility for Dual Enrollment for Dual Credit Students

Your acceptance to the Dual Enrollment for Dual Credit program at Shelton State Community College will be official only upon receipt of this form, completed and signed by the counselor of your local school, and a completed Application for Admission for Dual Enrollment for Dual Credit.



This section is to be completed by the student. The student and parent must also sign the Authorization for Release of Records statement at the bottom of the form.

Type of Dual Enrollment courses: Academic Technical Program of Study_____

Student ID Number: S_____

Name_____

Last Name

First Name

Middle Name

Address_____ Zip_____

City/State

Parent/Legal Guardian Name (please print)_____

This Section to be completed by High School Counselor or designee:

This student is enrolled in the 10th, 11th, 12th 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 Shelton State Community College. (**Transcript must be attached.**)

Please list College course(s) student is approved to take during the current semester/term.	Summer Semester	Course Prefix	Course Number
	Example →	BIO	103
	Incomplete forms will not be accepted.		

Counselor's Signature:_____ Date:_____

Parent/ Legal Guardian Signature: _____ Date:_____

In order to qualify for Career Technical Dual Enrollment scholarship funds, the student must submit a career interest inventory and four-year plan aligning with the chosen program of study. If the student does not have these two items, the high school must provide written statements regarding the student's interest in the chosen field in order to be considered for funding.

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, Shelton 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 Shelton 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_____

For College Use Only

Verified by_____ Date_____ Approved by_____ Date_____