

Temple College – Dual Credit / Early Admissions Registration Form

Please Print Date received from HS _____ Date received in A&R _____

Name _____ SSN _____ Today's Date _____

Semester to be enrolled: fall _____ spring _____ summer _____

Home Address _____

Phone _____ Date of Birth _____

High School _____

Proposed Month & Year of Graduation from high school _____

Where will class be attended? High school _____ Main campus _____ Taylor center _____
Cameron center _____ Texas Bioscience Institute _____ Internet _____

Have you taken Exit TAKS, THEA or Accuplacer? _____ When? _____

Circle one: Are you Dual Credit, Middle College (TBI), Early College student (ECHS)?

A. I have filled out a TC application. _____ initial
https://www.applytexas.org/adappc/gen/c_start.WBX?s_logon_msg=Y

B. Have you submitted official high school transcript, with TAKS scores or THEA or ACCUPLACER scores. _____ initial

C. I understand upon graduation I must submit an official transcript to Temple College with my graduation date, in order to receive a transcript or have a transcript sent to another institution. _____ initial

D. I understand that if I wish to drop a course I must complete and turn in a drop form for Temple College as well as whatever my high school requires. _____ initial

E. I understand that information regarding my enrollment status and academic progress at TC may be shared with the high school when needed. _____ initial

The college class load may not exceed two college credit courses (no more than 8 hour) per long semester (Fall and Spring), and no more than 12 college credits hours during the Summer session. Any exceptions must be approved by the Vice President of Educational Services at Temple College and the principal of student's home institution. Temple College assumes no responsibility for loss of eligibility of high school students who participate in University Interscholastic League Activities.

Vice President of Educational Services _____ Date _____

High school principal _____ Date _____

Discipline <i>Engl</i>	Course # <i>1301</i>	Section <i>1002</i>	Instructor <i>G. Smith</i>	Time/Date <i>MW 8am</i>	Location <i>MC</i>

I acknowledge my enrollment in the previously listed class(es).

Student's Signature _____

STUDENT RECORDS RELEASE REQUEST (optional)

Temple College is limited in the information that it may provide to parents because of the Family Educational Rights and Privacy Act of 1974. If you as a student would like for your parent to be able to get information regarding your academic progress, please complete the information and signatures below.

I give Temple College permission to release all records at Temple College (academic, disciplinary, etc.) to the person(s) listed below:

Name(s) _____

Student's Name (please print) _____ Signature _____

Social Security Number or Temple College ID number _____

*This form does not affect access to student directory information. Directory information is available to all persons unless otherwise restricted by you.

PARENT/GUARDIAN: I consent to having my child/ward enroll in TC's Dual Credit /Early (ECHS)/Middle College (TBI) Admissions Enrollment Program.

Parent/Guardian Singnature _____ Date _____

HIGH SCHOOL COUNSELOR/PRINCIPAL AUTHORIZATION

I verify that the student named above meets the high school and Temple College requirements for the Dual Credit, Early and Middle Admissions program as listed above. The student has my permission to enroll with Temple College for the: (circle one) Fall Spring Summer

Signature _____ Date _____

If you are a first time DC student please check that the following items have been included with this form.

- An official copy of your high school transcript, sealed _____
- A copy of your exempt TAKS report _____
- A complete Temple College Application _____

Credit or Debit card Payment Information:

Credit Card # _____

Expiration Date: _____

VPN Code (on back of card): _____

Billing Zip Code: _____

Name on Card: _____

Name of Student _____

Payment information will be destroyed after the intended charge is made and will **not** be kept on record with the college.

If you chose to attach a check for payment please staple it to this form and be sure that your student's name and SS# are on the check.

Once the student is registered for the class, payment can be made over the phone @ 254-298-8611 or 8610, up until the first day of classes. All payment after that is considered late and a late fee will be added.