

# Mississippi Delta Community College

## Dual Enrollment Packet/Checklist

Fall 2016-Spring 2017

### **Included Forms:**

- Dual Enrollment Application
- Dual Enrollment Approval Form
- GPSD Permission for Dual Enrollment

### **Items to Include:**

- Current Transcript
- Certification of Immunization Compliance (121 form)
- ACT Scores if taking Comp I & College Algebra

\*All documents must be completed and forwarded to Mrs. Cage, GPSD Graduation Coach. Signatures of all parties must be present in order for consideration into the GPSD Dual Enrollment Program.

Graduation Coach  
Manning Curriculum Complex Office 100A  
[bcage@gville.k12.ms.us](mailto:bcage@gville.k12.ms.us)  
(662) 822-6948



Social Security Number: \_\_\_\_--\_\_\_\_--\_\_\_\_

Date of Birth \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_  
(Area Code)

Office of Admissions and Records

P.O. Box 668

Moorhead, MS 38761

TELEPHONE: 662-246-6306

Seeking admissions for which term:

- Fall Term 20\_\_     Fall Special 20\_\_  
 Spring Term 20\_\_     Spring Special 20\_\_  
 Holiday Special 20\_\_     Summer Term 20\_\_

## APPLICATION FOR ADMISSION OR READMISSION

**(Do not use Nickname or initials) PLEASE PRINT OR TYPE PLEASE FILL IN ALL BLANKS**

Legal Name \_\_\_\_\_  
 Last First Middle (Previous name(s))

Mailing Address \_\_\_\_\_  
 PO Box City County State Zip Code

Physical Address \_\_\_\_\_  
 Street City County State Zip Code

<b>GENDER</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>U.S. CITIZENSHIP</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Have you taken the ACT?</b> <input type="checkbox"/> Yes When? _____ <input type="checkbox"/> NO <b>Did you list MDCC to receive your scores?</b> <input type="checkbox"/> Yes <input type="checkbox"/> NO	<b>Do you have a:</b> <input type="checkbox"/> High School Diploma <input type="checkbox"/> High School Certificate <input type="checkbox"/> GED <b>GED Test Location:</b> City _____ State _____	<b>*ETHNICITY</b> *This information is optional; it is used for statistical use only <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races
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Name of High School Attended \_\_\_\_\_ Date of Graduation \_\_\_\_\_  
 Month/Date/Year

Address of High School Attended \_\_\_\_\_  
 City State Zip Code

### Previous College(s) Attended (Official Transcripts Must Be Submitted) (List the most recent first and include any attendance at MDCC)

Institution Name	Address (City & State)	Dates of Attendance	Degree Earned

Please check the appropriate box:     Parent     Guardian     Emergency Contact

**Parental Information/Emergency Contact (Required for all; Parents must be listed if student is age 21 or under)**

Last Name First PO Box/Street City/State Zip Code

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Have you ever been convicted of a felony?     Yes     No    If yes, crime committed \_\_\_\_\_ Date of conviction \_\_\_\_\_

Are you to receive veteran's benefits?     Yes     No

## SELECT ONE (1) MAJOR

(A major must be indicated, your signature and the date must be present to validate this application)

### ALL UNIVERSITY PARALLEL PROGRAMS ARE AVAILABLE WITHIN THE FOLLOWING DIVISIONS

(Examples: Pre-Health Sciences – Physical Therapy, Social Sciences – Psychology, Business – Accounting)

#### UNIVERSITY PARALLEL PROGRAMS--A.A DEGREES (Leads to Bachelor's Degree)

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Art                                | <input type="checkbox"/> Communication     | <input type="checkbox"/> HPER            | <input type="checkbox"/> Pre-Architecture    |
| <input type="checkbox"/> Business                           | <input type="checkbox"/> English           | <input type="checkbox"/> Mathematics     | <input type="checkbox"/> Pre Engineering     |
| <input type="checkbox"/> Biological Sciences                | <input type="checkbox"/> General Education | <input type="checkbox"/> Music           | <input type="checkbox"/> Pre-Health Sciences |
| <input type="checkbox"/> Chemistry/Physics                  | <input type="checkbox"/> History           | <input type="checkbox"/> Social Sciences |  |
| <input type="checkbox"/> Computer Information Systems (CIS) |  |  |  |

#### TECHNICAL PROGRAMS (Leads to Associate in Applied Science Degree)

- |  |   |
|--|---|
| <input type="checkbox"/> Accounting Technology             | <input type="checkbox"/> Electronics Technology           |
| <input type="checkbox"/> Automotive Mechanics Technology   | <input type="checkbox"/> Field Crops Technology           |
| <input type="checkbox"/> Biomedical Electronics Technology | <input type="checkbox"/> Healthcare Data Technology       |
| <input type="checkbox"/> Computer Networking Technology    | <input type="checkbox"/> Machine Tool Technology          |
| <input type="checkbox"/> Culinary Arts Technology          | <input type="checkbox"/> Office Systems Technology        |
| <input type="checkbox"/> Drafting and Design Technology    | <input type="checkbox"/> Precision Agriculture Technology |
| <input type="checkbox"/> Electrical Technology             |   |

#### CAREER PROGRAMS (Career Certificate)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Automotive Machinist             | <input type="checkbox"/> Culinary Arts          | <input type="checkbox"/> Heating & Air Conditioning (HVAC) |
| <input type="checkbox"/> Automotive Mechanics             | <input type="checkbox"/> Electrical             | <input type="checkbox"/> Machine Tool Operation            |
| <input type="checkbox"/> Brick, Block and Stone Masonry   | <input type="checkbox"/> Electronics (one year) | <input type="checkbox"/> Office Systems (one year)         |
| <input type="checkbox"/> Construction Equipment Operation | <input type="checkbox"/> Field Crops (one year) | <input type="checkbox"/> Welding                           |

#### HEALTH SCIENCE PROGRAMS

(To apply for ANY Health Science program, please visit our website [www.msdelta.edu](http://www.msdelta.edu) and click "Programs of Study" and click Health Sciences for application packets and instructions.)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Allied Health  | <input type="checkbox"/> Health Care Assistant (one semester) | <input type="checkbox"/> Phlebotomy (one semester)     |
| <input type="checkbox"/> Associate Degree Nursing (RN)                        | <input type="checkbox"/> LPN Accelerated Track for ADN        | <input type="checkbox"/> Practical Nursing (PN)        |
| <input type="checkbox"/> Dental Hygiene Technology                            | <input type="checkbox"/> Medical Laboratory Technology        | <input type="checkbox"/> Radiologic Technology (X-Ray) |
| <input type="checkbox"/> Emergency Medical Technician (EMT)<br>(one semester) |   |  |

An official transcript of all previous high school/college work must be submitted to the Registrar's Office by the high school principal or registrar of the last school attended. This should be done as soon as possible after high school graduation or the close of the current college semester. A statement of acceptance will not be issued to the applicant until the following documents are received and approved by the registrar: (1) a completed application form (inaccurate or incomplete information will invalidate the application); (2) a transcript of your school record or GED scores; and/or college transcript from any previous college (if applicable); (3) ACT scores.

I have read and understand the conditions of the Student/Patron Use Agreement located at Admission on the MDCC Web Site. I realize that failure to comply with any of those conditions could result in disciplinary action against me as described in the college's Student Handbook. I also understand that the college is not responsible for any consequences or legal actions that may result because of my misuse of the college network resources. I hereby make application for admission to Mississippi Delta Community College and agree to abide by the regulations of the college.

STUDENT SIGNATURE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_

Mississippi Delta Community College is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the Associate of Arts Degree and the Associate of Applied Science Degree and Certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Mississippi Delta Community College

Mississippi Delta Community College does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies: The Associate VP for Institutional Effectiveness, Stauffer-Wood Administration Building, P.O. Box 668, Moorhead, MS 38761, 662-246-6558.

High School \_\_\_\_\_

New Dual Enrollment Student \_\_\_\_\_

MDCC Student D# \_\_\_\_\_

Returning Dual Enrollment Student \_\_\_\_\_

### DUAL ENROLLMENT/DUAL CREDIT VERIFICATION FORM CRITERIA FOR DUAL ENROLLMENT

1. Fourteen (14) core High School units
2. Minimum grade point average of 3.0 on a 4.0 scale
3. Recommendation by the high school principal and/or guidance counselor
4. ACT sub-score of 17 in English to qualify for English Comp I (ENG 1113)
5. ACT sub-score of 19 in Mathematics to qualify for College Algebra (MAT 1313)

**\*\*High School counselor must send an official transcript, which includes a graduation date, to MDCC in order for MDCC to release the college transcript.**

### STUDENT INFORMATION

Name: \_\_\_\_\_

SS#: \_\_\_\_\_

COURSE AND SECTION	COURSE TITLE	CREDIT HOURS	LOCATION	INSTRUCTOR	AMOUNT

Amount Paid \_\_\_\_\_ **NO CASH ACCEPTED** Check or Money Order # \_\_\_\_\_

### COUNSELOR VERIFICATION

The following documents are required for admission:

- ✓ An official high school transcript
- ✓ Counselor Verification form (A letter of recommendation may be submitted in lieu of verification form)
- ✓ A completed MDCC application for admission (may be printed from the website at [www.msdelta.edu](http://www.msdelta.edu))
- ✓ ACT scores if student has requested College Algebra or English Comp

**Certification Statement:** By my signature, I certify that the student named on this document meets the eligibility criteria for dual enrollment at MDCC. I understand that it is the responsibility of the high school to award appropriate Carnegie units toward high school graduation and to submit a completed high school transcript, which includes a graduation date, to MDCC in order for MDCC to release the college transcript. This letter is submitted to fulfill the written recommendation requirement.

\_\_\_\_\_  
Printed Name of High School Counselor or other Authorized Personnel

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of High School Counselor or other Authorized Personnel

\_\_\_\_\_  
Date

**Submit completed applications to: MDCC Dual Enrollment Coordinator, P.O. Box 668, Moorhead, MS 38761**

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# GREENVILLE HIGH SCHOOL

419 East Robert Shaw Street  
Greenville, Mississippi 38701  
(662) 334 - 7180

## Permission for Dual Enrollment

Dear Parent/Guardian:

All students who have 14 or more credits, meet the ACT requirement proposed by each college/university, a GPA of 3.0 or better, good attendance, and a good discipline record will be eligible for dual enrollment. The principal and the counselors must clear students who qualify. A consent form signed by the parent or guardian must be on file in the office of the principal or the counselor's office.

If the student is scheduled to participate in dual enrollment and does not have a form on file, the student will be scheduled in a regular class. Students will be paired with adequate classes to ensure proper supervision at all times.

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Please check one:

- Has parent permission for dual enrollment  
 Does not have parent permission for dual enrollment

As the parent/guardian, I understand that a fee of \$50 is due to the sponsoring university in order for my child to participate in this program and an *additional* fee of \$25 is added if the course is taken online.

MDCC Total Fee: \$75  
MVSU Total Fee: \$50

Counselor's Office Clearance: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Office Clearance: \_\_\_\_\_ Date: \_\_\_\_\_

*\*I give my permission for my child to be participate in dual enrollment.\**

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_