

Mississippi Valley State University

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)

*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
(662) 822-6948



Mississippi Valley State University

DUAL ENROLLMENT

APPLICATION

Social Security Number: _____ - _____ - _____ Name _____
Last First Middle/Maiden

Address: _____ City: _____ State: _____ Zip Code: _____

County: _____ Phone: () _____ Male _____ Female Date of Birth: ____/____/____

Race: _____

Have you taken the: _____ SAT _____ ACT Date taken: ____/____/____ Score: _____

High School Name: _____ Graduation Date: _____

Please list a contact person in case of emergency:

Name	Address	Telephone	Relationship
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Entrance Date: _____ FALL _____ SPRING _____ SUMMER I _____ SUMMER II YEAR _____

I will enroll at the: _____ MAIN CAMPUS _____ GREENVILLE CENTER

Expected Enrollment Classification:

_____ Freshman _____ Special
_____ Transfer _____ Readmit

To be completed by all applicants: "I understand that withholding information requested in this application or giving false information may make me ineligible for admission to, or continuation at, Mississippi Valley State University. With this in mind, I certify that all information pertaining to this application is correct and complete."

Signature _____ Date _____

Mississippi Valley State University offers equal educational opportunities to all persons without regard to sex, race, religion, national origin, physical or mental handicap, or age by applicable laws and regulations.

Mailing Address: Mississippi Valley State University - Office of Admissions and Recruitment
14000 Hwy 82 West #7222, Itta Bena, MS 38941-1400



**DUAL ENROLLMENT APPROVAL FORM
OFFICE OF ADMISSIONS AND RECRUITMENT
MVSU 7222 / 14000 HIGHWAY 82 WEST
ITTA BENA, MISSISSIPPI 38941
(662) 254-3346 OR (662) 254-3347**

STUDENT NAME _____ SOCIAL SECURITY# _____ / _____ / _____

HIGH SCHOOL _____ GRADE LEVEL _____

_____ HAS MET THE ENROLLMENT CRITERIA FOR THE DUAL CREDIT PROGRAM AND IS HEREBY GRANTED PERMISSION TO ENROLL IN THE COURSES LISTED BELOW.

COUNSELOR (Signature)

PRINCIPAL (Signature)

APPROVED COURSES

TERM

An Approval Form must be submitted for each term of enrollment. The form should reflect courses approved by your high school for enrollment. Dual Enrollment students may not enroll for developmental or physical education courses.

RELEASE OF ACADEMIC RECORD

I authorize Mississippi Valley State University to release my academic record each term to my high school. This release is counter signed by my parent or legal guardian, if I am less than 18 years of age. This release shall remain in effect until I provide written notice to Student Records Office to discontinue the release or until I earn my high school diploma.

Date

Student

Date

Parent / Guardian

Non-Discrimination Statement

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: _____