



## CONCURRENT ENROLLMENT PROGRAM REGISTRATION FORM – TO BE COMPLETED EACH SEMESTER

WESTERN COLORADO COMMUNITY COLLEGE - 2508 BLICHMANN AVE - GRAND JUNCTION, CO 81505 - 970.255.2670 – FAX 970.255.2650

Student Name: \_\_\_\_\_ Term:  Fall  Spring 20\_\_\_\_

Last First Middle

Date of Birth: \_\_\_\_\_ Social Security Number or Mesa State ID #: 700 \_\_\_\_\_ SASID: \_\_\_\_\_

(Required for COF) (Required)

Mailing Address: \_\_\_\_\_

Street City State Zip

Home Phone:(\_\_\_\_) \_\_\_\_\_ Cell Phone:(\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

High School: \_\_\_\_\_ Class Standing:  10<sup>th</sup> grade  11<sup>th</sup> grade  12<sup>th</sup> grade

**Complete only ONE section according to your registration status**

**EARLY SCHOLARS REGISTRATION**  New  Returning

*For current high school students wishing to take courses on a Colorado Mesa University campus.*

Please list the registration information for your desired course(s) below. Specific course information is available in the appropriate semester course schedule or online [here](#). **Note:** please check with your school regarding your financial obligation.

Course Dept/#	Course Title	CRN	Instructor	HS Approval
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Upon course registration, you will receive a confirmed schedule.** If your chosen course is full (and if a wait list exists for your chosen course) you will be placed on the wait list and be notified by the Registrar’s Office should an opening occur.

**HIGH SCHOOL SCHOLARS REGISTRATION**  New  Returning

*For students taking approved WCCC/CMU courses in their high school for dual credit.* To select courses offered at your high school, please access [www.coloradomesa.edu/wccc/hs/schools](http://www.coloradomesa.edu/wccc/hs/schools). **Note:** please check with your high school regarding your financial obligation.

Course Dept/#	Course Title	CRN	Instructor	HS Approval
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**STUDENT ELIGIBILITY – TO BE COMPLETED BY HIGH SCHOOL OFFICIAL**

**To be Completed by High School Official** (check all that apply):

This student is currently in the \_\_\_\_\_ grade.  The student is under 21 years of age.

This student is eligible to enroll in basic skills courses at the college (12<sup>th</sup> grade only)

**The school district agrees to pay tuition for \_\_\_\_\_ credits this term. Student’s SASID: \_\_\_\_\_**

Signature of High School Official: \_\_\_\_\_ Phone #: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Principal/Superintendent (designee): \_\_\_\_\_ Phone #: \_\_\_\_\_ Date: \_\_\_\_\_

**PARTICIPATION AGREEMENT – TO BE COMPLETED BY THE STUDENT & PARENT/GUARDIAN**

- I understand that this agreement entitles me/my child to enroll in college courses. I understand the following:**
1. I will meet the same course expectations and prerequisites as college students, as noted in course catalog and/or syllabus.
  2. The course(s) satisfies college degree, certificate and/or remedial education requirements and is in line with my ICAP.
  3. Course credits may transfer if I earn a grade of C or better in a Guaranteed transfer course, or accepted by postsecondary institution.
  4. The grade received in this course will appear on my official high school transcript and college transcript.
  5. If I withdraw from the course at the college/university after the drop/add date, I will receive a W or F grade on my college transcript.
  6. Regarding college activities: qualified students may participate in activities, but are not eligible for NCAA athletic activities.
  7. I will register for the College Opportunity Fund (COF) and I understand the credits earned will be deducted from my COF lifetime account.
  8. I understand I may only enroll in Guaranteed transfer courses and/or courses which apply to a specific pathway.
  9. I authorize the college to release my transcript to my school district and provide attendance information as required by the department of education.

\_\_\_\_\_  
Student Signature & Date

\_\_\_\_\_  
Parent/Guardian Signature & Date

I wish to pay my own tuition.