

SOUTHWESTERN MICHIGAN COLLEGE

Enrollment Authorization for High School Students and Early Learners

Check One: DUAL ACAD ACOT Other: _____

School District or Parent/Guardian of Home Schooled Student	Student Information
Name:	Name:
Street Address:	SMC Student ID: SSN:
City, State, Zip:	Street Address:
Billing Contact:	City, State, Zip:
Phone:	Phone: Date of Birth: Age:

List below each course in which the student will enroll. For each course, the high school or parent/guardian of a home school student must indicate payment options. The student must meet all prerequisites prior to registration. Prerequisites can be met by providing official copies of ACT, SAT, PSAT, or PLAN test scores or successfully completing COMPASS Placement Testing. If the student is eligible for dual enrollment, the student must complete the assignment of credit portion for each course.

Fill in the course(s) information below:

Semester & Year	CRN	Subject	Course #	Meeting Days	Meeting Times	Credit Hours	Contact Hours	If pre-requisite is required, how has it been met?	High School Official		Dual Enrollment Student	
									Initial Payment Options		Circle Credit Options	
									Tuition & Fees	Books & Required Supplies	High School Credit	College Credit
											Y N	Y N
											Y N	Y N
											Y N	Y N
											Y N	Y N

The signature below acknowledges the student's enrollment at Southwestern Michigan College and authorizes SMC to invoice the school district as indicated.

Printed High School Official's Name and Title

Signature of High School Official

The Student's signature below 1) indicates that he/she is eligible for dual enrollment 2) authorizes the credit distribution as indicated above, and 3) authorizes SMC to release academic records to the high school for the purpose of awarding credit. . I also understand that I must maintain a good academic standing at the high school. I understand I am fully responsible for all tuition and fees and the costs of collecting unpaid balances unless I follow the proper procedures for dropping.

Student's Signature

OFFICE USE ONLY

Enrollment Representative

Tuition Rate Exception: (Check if different than residence)
Tuition should be: In-District In-State Out-of-State

Additional Approvals Required

This section must be completed only for students ages 13 through 15 by parent/guardian.

Parent/Guardian Approval:

I, the undersigned, approve the student identified on this form to enroll at Southwestern Michigan College for the courses listed on the reverse side. I understand that my son or daughter is participating in an adult educational environment and I hereby assume responsibility and hold Southwestern Michigan College harmless for any adverse consequences of that participation. I further understand that enrollment is dependent upon approval by the appropriate dean and dependent upon an available seat in the course section selected.

Signature of Parent/Guardian

Print Name

Date

I approve the enrollment of this student for the following course(s) listed on this form:

Course: _____

Signature: _____

Course: _____

Signature: _____

Course: _____

Signature: _____

Course: _____

Signature: _____