



PROCEDURES FOR SPECIAL ADMISSION TO ST. CHARLES COMMUNITY COLLEGE

This procedure should be used by students who do not meet the entrance requirements listed in the catalog and are under the age of 16. This process must be completed each semester of enrollment.

1. Submit a school transcript and a completed SCC Application for Admission form to the Office of Admissions, St. Charles Community College, 4601 Mid Rivers Mall Drive, P.O. Box 76975, St. Peters, MO 63376-0975.
2. Take the Academic Skills Assessment in Room 1206F (Tel. # 636-922-8246) located in the Administration Building prior to meeting with the Director of Student Development.
3. Complete and submit to the Director of Student Development, Room 1204, in the Administration Building the following materials:
 - a. The attached Special Admissions form including the signatures of the student, parent, and school principal.
 - b. A letter from the school principal or parent if student is home schooled explaining why the student should be served by SCC and recommending areas of study.
4. Make an appointment for an interview with the Director of Student Development in the Administration Building, Room 1204, (Tel. # 636-922-8238). The Director will assist the student in completing the Class Registration/Add-Drop form.
5. Following the initial interview, the Director of Student Development will send a recommendation along with the above listed information to the Academic Affairs Office. The application will be reviewed by the Academic Affairs Office, in consultation with respective instructors, to determine if the course and its content are appropriate for students under the age of 16. The Academic Affairs Office will forward the application, together with its recommendation, to the Director of Student Development.
6. The Director of Student Development will notify the parents of the admission status of the applicant.
7. When notified of admission, the student may proceed to register and pay for the course(s).

Please be advised that the special admission process may require several visits to the College and several weeks to finalize. Please begin the process as early as possible.



**APPLICATION FOR SPECIAL ADMISSION
(For those persons under the age of 16)**

This application must be completed each semester of enrollment.

Check the term for which you are applying: Summer Fall Spring Year _____

Name: _____
Last First Middle

Address: _____
Number/Street City State Zip

Phone: _____ School District: _____

Check your current grade or class: Freshman Sophomore Other _____
Explain

Current grade point average: _____

SCC Course Number(s) and Title(s) that you wish to enroll in:

_____/_____
_____/_____

Reason for Attending SCC:

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____
(Signature gives permission and acknowledgement to enroll in courses that contain college-level content.)

School Principal's Signature: _____ Date: _____
(Parent's signature required if student is home schooled. Principal or parent must attach a letter recommending the student and areas of study the student may take from SCC.)

(This portion is for SCC official use only.)

_____ Approved _____ Denied

Rationale: _____

_____/_____
Director of Student Development Date

_____/_____
Vice President for Academic Affairs Date