If you’re a junior or senior in high school and want the challenge of college-level academic studies, consider the dual enrollment program at St. Charles Community College.

You may qualify for the dual enrollment program if you are a high school junior or if you will enter the junior level at the time of dual enrollment, and have at least a 2.5 cumulative GPA from the preceding semester. (May vary by school district.)

Investigate the opportunities for pursuing challenging academic studies above and beyond the high school curriculum. Talk with your parents/guardians and your high school counselor to see if you can expand your educational background by taking college-level courses.

Please note: Students participating in the dual enrollment program are not eligible for financial assistance; however, failure to successfully complete courses through the dual enrollment program may impact future financial assistance eligibility.

How to apply:
1. Complete the online application at stchas.edu/apply and complete the back of this form, answering all questions.
2. See your high school counselor or principal for approval and completion of the section of the form under “Dual Enrollment Approval.”
3. Students enrolling through the dual enrollment program are allowed to register for a maximum of 9 hours of credit per semester. Enrollment in developmental courses or physical education courses is not allowed.
4. Have your parents/guardians sign for approval to enroll.
5. Mail the completed form along with a copy of your high school transcripts to:
   Sarah Manfucci
   Social Sciences Building - Room 2110
   St. Charles Community College
   4601 Mid Rivers Mall Drive
   Cottleville, MO 63376-2865
   Forms and transcripts may also be emailed to: smanfucci@stchas.edu
6. Students without previous college credit who plan to take six credit hours or more might be required to take the Academic Skills Assessment or submit ACT scores before enrolling. Please call 636-922-8629 for assessment hours.
7. Students who have never taken classes at SCC are required to see the dual credit coordinator before registering for classes. For an appointment, email smanfucci@stchas.edu and identify yourself as a dual enrollment student.
8. Course Schedules are available online at stchas.edu. Click on “Quick Links” at the top of the page, then select “Course Schedule & Description”. The schedule can be found by clicking the credit schedule button at the top.
Application for Dual Enrollment
at St. Charles Community College

(A dual enrollment application must be submitted every semester.)

1. Full legal name: ____________________________________________
   Last       First       Middle

2. SCC student number: _________________________________________

3. Anticipated date of graduation from high school: ____________
   Month/Year

4. High school attending: ____________________________ GPA: ______
   School name       City/State

5. Application submitted for: Fall Term, August 20 ______
   Spring Term, January 20 ______
   Summer Term, June 20 ______

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Dual Enrollment Approval

High School Official Completes (if home-schooled, parent should sign verifying GPA):
I recommend the above named student for admission to St. Charles Community College while attending high school, and believe, in my opinion, that the student will benefit from dual enrollment. By my signature, I am certifying that the student has at least a 2.5 cumulative GPA (may vary by school district).

__________________________  Date
Signature (Required)         

Parent or Guardian Completes:
I understand the conditions under which the above named student is enrolling at St. Charles Community College and grant permission for enrollment in courses that contain college-level content.

__________________________  Date
Signature (Required)         

Student Completes:
My signature grants permission to St. Charles Community College to release grades, attendance information, citizenship information and transcripts to the high school and my parent or legal guardian listed on this form.

__________________________  Date
Signature (Required)         

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((Optional) MEETING DAYS & TIMES)