

## EARLY COLLEGE CREDIT APPLICATION

**I. STUDENT INFORMATION**  
*This section completed by student / parent*

Student Name <i>First, Middle, Last</i>	Student's Birthdate <i>Mo./Day/Yr.</i>	Gender M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/>
Parent/Guardian Name <i>First, Last</i>		
Address <i>Street, City, State, Zip, County</i>		

Student Phone <i>Area/No.</i>	Student Email
Parent/Guardian Phone <i>Area/No.</i>	Parent/Guardian Email

High School Student Attends & Projected Graduation Year	School District in Which Student Resides
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Taking Course for <input type="checkbox"/> hs credit <input type="checkbox"/> post-secondary credit <input type="checkbox"/> both	Grade Student Will be in When Taking These Courses <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Number of College Credits Earned to Date
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Semester for which applying:     Spring     Fall    Year 20

I. COURSE INFORMATION				II. BOARD ACTION <i>Completed by HS district</i>			
Check if Alternate	Herzing University Course Name	College Course Number	No. of College Credits	Comparable HS Course Offered?		Approved for HS Credit	No. of HS Credits
				Yes	No		
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**III. STUDENT & PARENT / GUARDIAN SIGNATURES**  
*This section completed by student / parent*

**STUDENT SIGNATURE—IN SIGNING THIS DOCUMENT**, I acknowledge the following:

- I understand and will comply with the assurances and conditions outlined in "Student/Parent Specific Responsibilities".
- I authorize the high school and Herzing University to share course and grade information.

Student Signature <b>Required</b>	Date Signed <i>Mo./Day/Yr.</i>
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**PARENT/GUARDIAN SIGNATURE**—*Required if student is under 18.*

- I understand and will comply with the assurances and conditions outlined in "Student/Parent Specific Responsibilities".
- I authorize the high school and college to share course and grade information.

Parent/Guardian Signature <b>Required</b>  ➤	Date Signed <i>Mo./Day/Yr.</i>
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<b>IV. STUDENT NAME</b> <i>This section completed by student / parent</i>
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Student Name <i>First, Middle, Last</i>
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<b>V. HIGH SCHOOL BOARD APPROVAL</b> <i>This section completed by district</i>
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Named student is approved to enroll for courses marked "Approved" in Section III:  <input type="checkbox"/> Yes <input type="checkbox"/> No. <i>If no, indicate reason for denial:</i>
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<input type="checkbox"/> Check if student has a record of disciplinary issues.
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Name of High School Board Approval Authority	Phone <i>Area/No.</i>
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High School Board Approval Authority Signature  ➤	Date Signed <i>Mo./Day/Yr.</i>
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<b>VI. Herzing University APPROVAL</b> <i>This section completed by college</i>
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Name of Course(s) in Which Student is Enrolled	Course Code(s) / Number(s)	No. of College Credits	District Approved?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Eligible to enroll	<b>I CERTIFY</b> that the above-named student is eligible to attend the course(s) listed in Section VI and that all these courses are nonsectarian in content. The student will be notified of college admission policies/criteria and record disclosure provisions. Herzing University agrees to provide the school district with grade information (and attendance information upon request).
<input type="checkbox"/> Not eligible to enroll	<b>I CERTIFY</b> that the above-named student is not eligible to enroll in and/or attend the course(s) listed in Section VI. The student will be notified of the reasons for ineligibility.

Name of Herzing University Representative and Title	Phone <i>Area/No.</i>	Email
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Herzing University Representative Signature  ➤	Date Signed <i>Mo./Day/Yr.</i>
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<b>VII. APPEALS</b>
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Appeals of school board decision: A student may appeal a school board decision regarding awarding of high school credit or course comparability to the State Superintendent within 30 days of the board's decision.