



ALABAMA SOUTHERN COMMUNITY COLLEGE

Application for Admission for Dual Enrollment for Dual Credit/ Accelerated High School

This application is for accelerated credit and/or dual enrollment purposes. Once you have graduated high school, you must complete the regular College Application for Admission to be admitted as a college student.

For Office Use Only: Student # _____ Photo ID _____ Staff _____ Date _____

Which College location will you attend? _____

What term will you enroll? ☐ Fall ☐ Spring ☐ Summer Year _____

Type of Dual Enrollment courses: ☐ Academic ☐ Technical

Program of Study: _____

Social Security Number: _____

Date of Birth: _____

Name: _____
Last Name First Name Middle Name

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

High School You Attend: _____

Anticipated Graduation Year: _____

Emergency Contact Person: _____

Emergency Phone Number: _____

Have you lived in the State of Alabama for the past twelve months? ☐ Yes ☐ No

Self-identification of information regarding sex, ethnicity, and race is optional. If you choose to self-identify, the information will be used only for federal/state reporting and will not affect the admission decision in any way.

Sex: ☐ Male ☐ Female

Are you a United States Citizen? ☐ Yes ☐ No

What is Your Ethnicity: ☐ Hispanic or Latino ☐ Other

What is Your Race (you may choose one or more of the listed categories):
☐ American Indian or Alaskan Native ☐ Asian
☐ Black or African American ☐ White
☐ Native Hawaiian or Other Pacific Islander

The College may release directory information without obtaining permission from the student. Examples of directory information include but are not limited to, student's name, address, telephone number, program of study, dates of attendance, and degrees awarded.

Do you wish to prohibit the release of your directory information? ☐ Yes ☐ No

The College will honor your request to withhold directory information but cannot assume responsibility to contact you for subsequent permission to release it. The College assumes no liability for honoring your instructions that directory information be withheld.

Have you previously attended any other college? ☐ Yes ☐ No

If yes, list all colleges previously attended.

Name of Institution	City/State	Dates of Attendance	Degree Earned	Are you on suspension?

I certify that the information contained on this application is true and correct to the best of my knowledge. I understand that any false statements or information may result in disapproval of this application or expulsion from the College.

Student Signature: _____

Date: _____

The College is committed to equal opportunity education. The College is guided in philosophy and practice by the principle that individuals shall not be treated differently because of race, creed, religion, color, sex, age, national origin, or disability, and that legitimate and reasonable access to facilities shall be available to all. This principle particularly applies to the admission of students in all programs of the College in their academic pursuits. It is also applicable in extracurricular activities, all student development services, employment of students by the College, and employment of faculty and non-instructional staff. Therefore, the College is in compliance with Titles VI and VII of the Civil Rights Act of 1964, as amended; the Civil Rights Act of 1991: Executive Order 11246, as amended; Title IX of the Educational Amendments of 1972; Section 504 of the Rehabilitation Act; and the Americans with Disabilities Act of 1990. The College is an Affirmative Action/Equal Employment and Educational Opportunity Institution. If you require reasonable accommodations under ADA, please let us know.