

DUAL CREDIT APPLICATION

I. Dual Credit Type (Please Check all that Apply)
This section completed by High School Representative

Virtual Pathways (9th-12th) Start College Now (11th-12th) Academies / Contracted (38.14)
 Other (Youth Apprenticeship, Early/Middle College (Michigan), Private Schools, Summer Courses)

* If selecting more than one type please label the courses by type in the II. Student information Section *

If the student is self-pay, please reach out to startcollegenow@nwtc.edu to receive the self-pay paperwork

II. STUDENT INFORMATION
This section completed by student / parent

Student Name First, Middle, Last	Student's Birthdate Mo./Day/Yr.	Gender
		M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/>

Address Street, City, State, Zip, County

Student Mobile Phone Area/No.	Student Email- Please use an email that you check regularly
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Parent/Guardian Name First, Last

Parent/Guardian Phone Area/No.	Parent/Guardian Email
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High School Student Attends	Projected Graduation Year	School District in Which Student Resides
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Technical College to Which You Are Applying to Northeast Wisconsin Technical College	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: <input type="checkbox"/> Spring <input type="checkbox"/> Fall Year 20__	II. BOARD ACTION <i>Completed by HS district</i>	
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Check if Alternate*	Technical College Course Name	Technical College Course Number if avail.	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"/>	

*This indicates that this course is a backup course if another approved course is unavailable

III. Textbook Release*This section completed by student*

I authorize textbooks that are billed to a third party be released to the parent or guardian identified on this application.

Student Initials: _____

IV. NWTC Campus Resources*This section completed by student*

Are you interested in being connected with NWTC Student Services? Check what you are interested in below-

Disability Services Career Services Academic Tutoring and Coaching
 Study Abroad Housing and Food Support

V. 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” and Subchapter 38.12 (14).
- I authorize the high school and technical college to share course and grade information.
- I understand that there is a separate College process to grant my parent/guardian access to my course and grade information.

Student Signature **Required**

Date Signed Mo./Day/Yr.



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” and Subchapter 38.12 (14)
- I authorize the high school and college to share course and grade information.
- I understand that there is a separate College process for my student to grant me access to their course and grade information.

Parent/Guardian Signature **Required**

Date Signed Mo./Day/Yr.



	VI. STUDENT NAME <i>This section completed by student / parent</i>	
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Student Name *First, Middle, Last*

	VII. HIGH SCHOOL BOARD APPROVAL <i>This section completed by district</i>	
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Named student is approved to enroll for courses marked "Approved" in Section II:

Yes No. *If no, indicate reason for denial:*

Check if student has a record of disciplinary issues.

Name of High School Board Approval Authority	Phone Area/No.
High School Board Approval Authority Signature ➤	Date Signed Mo./Day/Yr.

	VIII. TECHNICAL COLLEGE APPROVAL <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	I CERTIFY 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. The technical college agrees to provide the school district with grade information (and attendance information upon request).		
<input type="checkbox"/> Not eligible to enroll	I CERTIFY 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 Technical College Representative and Title	Phone Area/No.	Email

Technical College Representative Signature ➤	Date Signed Mo./Day/Yr.
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	IX. APPEALS	
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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.