



School Type:  Public High School  Private High School  Homeschool

**Spring 2019 Dual Enrollment Application**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

High School \_\_\_\_\_ Year of H.S. Graduation \_\_\_\_\_ SSN (required) \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Student Phone \_\_\_\_\_ Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Student Email Address \_\_\_\_\_ Parent Email Address \_\_\_\_\_

Catalog Course Letters	Catalog Course Numbers	Section Number	Course Title	Cr. Hours	Meeting Time	Days	Credit Options		
							H.S.	SAU	Both
									X
									X

**Payment Agreements\***

The school agrees the student is eligible and approved for State funded tuition and fees for the dual-enrollee as defined by the Postsecondary Options Act. (If this section is left blank, the student/parent/guardian is responsible for payment. Arrangements for payment must be made at the time of registration.)

Yes \_\_\_\_\_ No \_\_\_\_\_

If **YES**, the student's class schedule, grades, and academic progress will be released to the high school by Spring Arbor University.

\_\_\_\_\_  
Principal or School Designee Signature Date

I understand that I am responsible for the balance if the school does not approve payment or only approves partial payment. If my student withdraws from the course after the add/drop window, receives a failing grade, or exceeds the dual enrollment course limitation set by the State of Michigan, some out of pocket expense may apply. I understand that my student is registering for a college class and is subject to Spring Arbor University policy.

\_\_\_\_\_  
Parent/Guardian Signature Date

**Student Agreement**

Transcripts and diplomas will not be furnished until the account is paid. I understand that I am responsible for all tuition and fees NOT covered by my school. Past due accounts may be subject to a \$30 fee per month. I agree that failure to meet financial obligations shall result in the referral of the delinquent account to an outside agency for collection of the total amount due plus all collection costs (a minimum 33.33% of the total delinquent account), attorney and court fees when applicable. This agreement is effective from this date and continues until such time that the account is paid in full.

**To be completed by sending school: Spring Arbor University Dual Enrollment program costs have been aligned with the State of Michigan Dual Enrollment Calculation Worksheet available on the Michigan Department of Education website to limit out of pocket expense to students. Please provide the following information.**

Is the High School on semesters or trimesters? Semesters  
How many classes per term is a typical H.S. student enrolled in? 7

**\*If a student is paying out of pocket with no state funding a per credit hour cost**

**Parent or Guardian Signature**

**Date**

**(Non-Public High School Only) UIC Number must be provided for State funding:**

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