



VANGUARD
UNIVERSITY

Dual Enrollment Registration Form

Contact Information

Please provide valid information for the college to contact you through phone or email.

Last Name	First Name	Middle Name	
Gender (Male or Female)		Date of Birth (MM/DD/YYYY)	
Address	City	State	Postal Code
Cell Phone (###) ###-####	Other Phone (###) ###-####	Email Address	

Ethnicity

To comply with laws, students are invited to voluntarily self-identify their race or ethnicity. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations. When reported, data will be aggregated and will not identify any specific individual.

Are you Hispanic or Latino?

☐ Yes, I am Hispanic or Latino

☐ No, I am not Hispanic or Latino

What is your race? Select one or more.

☐ American Indian or Alaska Native

☐ Asian

☐ Black or African American

☐ Native Hawaiian or Pacific Islander

☐ Caucasian

☐ Other: _____

Applicant Interest

Specify the term and program for which you are interested in applying.

☐ Spring 2018

☐ Summer 2018

☐ Fall 2019

How many courses do you interested in taking?

☐ One course

☐ Two courses

Education

High School—Specify your high school.

☐ I am currently enrolled in high school

☐ I am home schooled

High School Name	Address		
City	State	Postal Code	Date of Graduation (or anticipated date)



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Endorsement/Transcript

Please ask a Teacher or Counselor at your High School to provide a brief typed assessment of your aptitude to succeed in a university level course. You must have an endorsement indicating your ability to be successful in a college level course to obtain admission to the Dual Enrollment program. Please have your counselor email a copy of your High School Transcripts to dualenrollment@vanguard.edu.

Acknowledgment

- Dual Enrollment is NOT a guaranteed admission program. The decision to be accepted into the program depends on what course(s) I will be taking, my GPA, available space, and other eligibility variables.
- I understand that acceptance into the Vanguard University Dual Enrollment program only grants me 'Visiting Student' status. It does not constitute admission to a regular semester (fall or spring) of Vanguard University, nor does it give my application preference over other applications in the future.
- I agree to abide by all University regulations during my attendance in the Dual Enrollment program and that it is my responsibility to learn about these regulations.
- I grant Vanguard University permission to release information of a general nature regarding my enrollment in the Dual Enrollment program to my high school and for statistics-gathering purposes.
- I grant Vanguard University, the Registrar's Office to share my application information and course enrollment information with other Vanguard University offices and programs as needed.
- I acknowledge my Grade Point Average (GPA) for all completed High School coursework is a 3.5 or higher on a 4.0 scale. Any coursework taken at a college-level has been completed at a 3.0 (B) or higher.

☐ Yes, I understand and agree to the statement above.

☐ No, I do not agree. I understand by selecting "No" I may not meet requirements for admission.

_____/_____/_____
Student Signature (Electronic—Please Type Name)

_____/_____/_____
Date

_____/_____/_____
Parent/Guardian Signature (Electronic—Please Type Name)

_____/_____/_____
Date

Thank you for completing the application for the Dual Enrollment program at Vanguard University. We will be in contact with you.