



DUAL / CONCURRENT ENROLLMENT

Registration Form

Dual Enrollment Contact Info
 Phone (989) 317-9217 Email dual@midmich.edu

Student's Legal Name: _____ MID Student ID#: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Date of Birth: _____ High School: _____ Home Schooled

Grade Level (At start of semester): _____ Current GPA: _____ Early College Student (5th year program): Yes No

SEMESTER: FALL (Aug-Dec) WINTER (Jan-May) SUMMER (May-Aug) Year: _____

NOTE: A new registration form will be required for each semester.

Course Subject & Section <i>(Identify course for enrollment)</i>	Credit Election <i>(Circle one for each course)</i>	Amount Covered By High School District: <i>(To be completed by High School Personnel -Select one option for each course)</i>		
		Pays ALL (✓) <i>District pays all tuition and fees</i>	Pays ZERO (✓) <i>District will pay \$0</i>	Pays Up To \$ <i>Max \$ per course</i>
Example: PSY.101.H01	Example: HS&C / College only			
1)	HS&C / College only			\$
2)	HS&C / College only	Same amount as line 1	Other amount: \$	
3)	HS&C / College only	Same amount as line 1	Other amount: \$	
4)	HS&C / College only	Same amount as line 1	Other amount: \$	
5)	HS&C / College only	Same amount as line 1	Other amount: \$	

Alternative Courses (Optional): Should any of the above courses be unavailable for enrollment, you may select up to two alternative courses.

Alternative Course Subject & Section	Credit Election	Amount Covered By High School District:		
		Pays ALL (✓) <i>District pays all tuition and fees</i>	Pays ZERO (✓) <i>District will pay \$0</i>	Pays Up To \$ <i>Max \$ per course</i>
Example: SOC.101.H01	Example: HS&C / College only			
1st Choice:	HS&C / College only			\$
2nd Choice:	HS&C / College only	Same amount as line 1	Other amount: \$	

STUDENT ACKNOWLEDGEMENT: I certify that the above information on this registration form is complete and accurate. I understand and accept the conditions of Dual Enrollment at MID outlined in the Dual Enrollment Handbook. I acknowledge that Mid Michigan College and authorized representatives of MID, including my instructor(s), are able to release any information, including grades, attendance, progress reports, behavioral incidents or concerns, and official transcripts to my high school and my parents/guardians at any time during my enrollment as a dual student at MID.

Student Signature

Date

High School Personnel Signature

Date

SEMESTER: _____

MID Office Use Only

Application (PRSP): _____ Cohort (STAL): _____ Sponsorship (STSP): _____ Registered (RGN): _____