

# Student Enrollment Form

You can type in the requested information now, then print this form for the required signature sections; or you may download this form for later use.



**DUALADMISSION**  
AT HEARTLAND COMMUNITY COLLEGE

**HCC ID #:**

**Student Name**

**Date of Birth**

**High School**

**Career Center (if applicable)**

**Graduation [MM/YYYY]**

## COURSE INFORMATION SECTION

You can complete this section with a Heartland advisor or use our campus schedule. You should know if these courses are for high school and college credit (dual credit) or for college credit only (dual enrollment) before meeting with a Heartland advisor.

**COURSE TITLE**  
(Example: ENGL 101)

**SEMESTER & YEAR**  
(Example: Fall 2020)

**Dual  
Credit**

**Dual  
Enrollment**

## HCC ADVISOR SECTION

**FOR OFFICE USE ONLY:** A Heartland advisor will complete this section based on the information provided in the Course Information Section

**TERM**

**COURSE ID**

**INITIALS**

### Student - Your signature below affirms the following statements:

- ✓ You are choosing to take college courses with college-level materials, coursework and subject matters.
- ✓ You are aware of the financial responsibility for taking courses on one of Heartland's campuses or online through our Dual Admission program.
- ✓ You are granting Heartland Community College permission to share information regarding your academic standing, which includes, but is not limited to, your academic transcripts, enrollment status, grade reports, placement test results with your parent(s)/guardian(s) and/or high school.

**Signature:**

**Date:**

### Parent/Guardian - Your signature below affirms the following statements:

I grant permission for the aforementioned student to register for college courses through the Dual Admission program at Heartland Community College. I understand that the courses offered through this program contain college level materials, coursework, subject matters and are subject to Heartland's tuition and fee rates, which may change at any time. Moreover, I understand that students and their parents/legal guardians accept financial responsibility for the cost of educational services provided by Heartland Community College.

**Name:**

**Signature:**

**Date:**

### HS Administrator (For Dual Credit ONLY) - Your signature below affirms the following statements:

I affirm that this student is in good academic standing at the high school level and should have the opportunity to benefit from college-level instruction. Moreover, this student has been advised regarding course options that are appropriate for his/her educational objectives and has the maturity level required to handle college-level coursework and subject matter.

**Name**

**Job Title**

**Signature**

**Date**