WSCU
Western State Colorado University
Learning, elevated.

Concurrent Enrollment
Application Agreement and Registration Form - First Time Concurrent Students

You have indicated that you are interested in enrolling in a Western State Colorado University course while a high school student. The State of Colorado provides several options for high school students who meet high school standards to begin college early. The purpose of these options include promoting content standards, providing academic challenges, and providing access to academic courses that may not be available at a local high school to meet high school graduation requirements. Persons under twenty-one years of age, enrolled in the 9th - 12th grade in a school district, who demonstrate academic preparedness, are eligible for concurrent enrollment programs. Students enrolled in 12th grade at a school district may enroll in remedial courses, if approved by the school district. If a high school student is retained for instructional purposes in the 12th grade, they may not enroll in more than 9 credits concurrently during the repeat year. To enroll at an eligible post-secondary institution a student must have completed the minimum course prerequisites and all required assessments.

SECTION A: To be completed by student (PLEASE PRINT)

Name of Student _____ Current Grade in School _____

Semester and Year of Expected Enrollment ☐ Fall ☐Spring of the year _____

Student ID # _____Social Security #_____SASID # _____ School District _____

Address _____City _____ Zip _____

Home Phone_____ Cell _____

Email _____ Date of Birth _____/_____/_____ Age _____

Name of Parent / Guardian _____ Parent/Guardian Phone_____

Emergency Contact Name_____

Emergency Contact Phone_____

Name of School Currently Attending_____

Home School ☐ Yes ☐No

In order to comply with civil rights laws, WSCU must attempt to collect race/ethnicity information about our students and employees. We invite you to voluntarily self-identify your race/ethnicity below. Refusal to provide this voluntary information will not subject you to any adverse treatment. This information is confidential and used only in compliance with the law.

1) Do you consider yourself to be of Hispanic/Spanish origin or Latino/Latina regardless of race? ☐ Yes ☐No
2) In addition, if applicable, select one or more of the following racial categories to describe yourself:
   ☐American Indian or Alaska Native ☐Asian ☐Black or African American ☐ Native Hawaiian or other Pacific Islander ☐White

SECTION B: To be completed by student and the student's parent or guardian (PLEASE PRINT)
Attention Student and Parent or Guardian: Your signature below indicates that you wish the above names student to participate in the Concurrent Enrollment Program at Western State Colorado University and you agree to the following:

1. The student received advice and counsel about participating in the Concurrent Enrollment Program from his or her high school.
2. The student must apply for the College Opportunity Fund (COF) before enrolling in any concurrent enrollment course. This can be done online at https://cof.college-assist.org/
    a. Click on '**Apply for Stipend'** and fill out the form
    b. Students must be admitted and enrolled at WSCU to receive COF stipend
    c. Processing takes approximately 3-5 business days
3. The student also needs to authorize use of the COF stipend for all eligible credits for the semester stated above and all future semesters. College-level credits used will be deducted from the student's COF lifetime account.
    a. **AFTER** you register you will receive a letter from WSCU with your Student Number and Password
    b. Once you receive your WSCU student ID and password
    c. Log-in to WSCU University Service/WOL - http://www.western.edu/inside
    d. You will use that ***student number*** to log in to WSCU computer resources, for example ***stu123456***. If you need help with your student number you can call 970) 943-2885 or stop by Taylor Hall 303.
    e. Your ***initial password*** is a combination of numbers and letters, for example **G2acQ7dF85**. This letter also includes information on how to reset and activate your new password for the WSCU computer system. If you need help with this call the WSCU Student Helpdesk at (970) 943-3333 or stop by Taylor Hall 125.
4. The student must meet the same prerequisites and course expectations as all other university students in a course, as noted in the WSCU catalog and the course syllabus.
5. The grade received in each course will appear on the student's official high school and university transcripts.
6. College course credits may transfer in congruence with Colorado GT Pathways or articulation agreements if the student earns a "C" or better in the course.
7. If the student seeks to add, drop or withdraw from a university course, he or she must meet with the High School counselor and notify the university Concurrent Enrollment staff.
8. If the student withdraws from a course after the drop deadline, the university will record a "W" or "F" on his or her university transcript.
9. IF the students receives a grade of "F" or an "Incomplete" or withdraws from a course after the drop deadline, the student and the student's parent or guardian may be required to pay the school district for the tuition paid for the course.
10. The student may not enroll in a course under the Concurrent Enrollment Program unless it fits with his or her individual Career & Academic Plan.
11. Only courses that apply toward a college degree or certificate or (For 12th graders only) that qualify as basic skills courses are covered under the Concurrent Enrollment Program.
12. The student may not enroll in a course under the Concurrent Enrollment Program unless approved by the school district.
13. In compliance with the Family Education Rights and Privacy Act (FERPA) of 1974, the students give permission to report absences and disciplinary issues, and to release grades, transcripts, in progress grades, class schedules, and billing information as available to the School District for the covered under the Concurrent Enrollment Program.

Western State Colorado University

Authorization to Release Academic Information for Concurrent Students

Student's Name: _____

Student WSCU ID Number: _____

Under the *Family Educational Rights and Privacy Act of 1974 (FERPA)*, Western State Colorado University is permitted to disclose any *directory information* to anyone who requests it. Currently, directory information includes the following: student's name, local/campus address, home or off-campus address, local/cell phone number, date and place of birth, tuition and fee status, class level, major field of study, college of enrollment, participation in officially recognized activities, and most previous educational agency or institution attended by the student. Western State Colorado University is not permitted to disclose any *non-directory* information to anyone without a legitimate educational interest or without written permission from you, the student.

By signing below, I waive my rights under FERPA and authorize that the faculty, administrators, and staff of Western State Colorado University have my permission to access non-directory information including my academic records and discuss my academic progress with my parents/guardians and/or other designated person(s) listed below. This includes all academically-related content issues, including, but not limited to: class attendance, class participation, and academic records (i.e. grades, transcripts, and schedule).

I consent to the disclosure of any personally identifiable information from my educational records to my parent(s)/guardian(s) and/or other designated person(s) listed below, for reasons determined by Western State Colorado University as appropriate. My final grades will be sent to the below address(es) at the end of each semester.

This waiver is valid for the period of my admission to Western State Colorado University unless otherwise revoked.

Student Signature: _____

Date: _____

Authorized Recipients (e.g. parent[s]/guardian[s], high school guidance counselor, other designated person[s]):

Name(s):	Name(s):
Title:	Title:
Address:	Address:
City, State, Zip:	City, State, Zip:
Telephone:	Telephone:

Section C Part 1: Student Eligibility: To be completed by High School counselor/principal. Check all that apply.

❑This student is under 21 years of age.
❑The student is currently in the _____ grade.
❑This student is continuing 12th grade.
❑This student is eligible to enroll in basic skill courses at the university (12th grade only)
High School counselor/principal Signature: _____ Date: _____ Title_____

Section C Part 2: Course selection: To be completed by student and High School Counselor
Attention High School Counselor: Your initials next to a course verify that the course is included in the student's ICAP/PEP

Subject	Course Number CRN	Title	Credit Hours	Counselor Initials

Verify SASID#_____

Section D Part 1: School District & University Approval
If signed by the Principal and the Superintendent or their designees, the School or School District agrees to pay the tuition for each course initialed above:

❑The school agrees to pay the tuition for _____ credits for _____ semester.
❑The school district agrees to pay the tuition for _____ credits for _____ semester.
Approved by Principal (or designee) _____ Title_____ Date_____
Name of High School: _____
Superintendent (or designee) signature _____Title_____Date_____

Section D Part 2: University Approval
Approved by university administrator:_____ Title_____Date_____

❑I wish to pay my own tuition. Note district does not pay cost for independent home school students.
<u>If you are paying your own tuition, complete this information</u>

❑ Visa
❑ Master Card
❑ Discover
❑ Cash
❑ Check (Payable to Western State Colorado University)

NAME ON CARD_____
CARD NUMBER _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
Expiration Date __/___

Signature_____ Amount: ($100 per credit)_____

Checklist for New Students

❑COF Verification Completed (REMEMBER to also authorize use of the COF stipend for all eligible credits for the semester)
❑Copy of qualifying ACT or Accuplacer Scores
❑This document (Agreement/Registration Form) completed with all signatures.
❑Deliver this form to your high school counselor.
❑**RETURN THIS ENTIRE DOCUMENT TO:**

Western State Colorado University
ATTN: Concurrent Enrollment Director
600 North Adams
Taylor 303
Gunnison, CO 81231

QUESTIONS: 970.943.2885 FAX: 970.943.7068