**Illinois State University**

***Dual Enrollment Interest Form for University High School Students***

***Student Name:***

Last First Middle

***Student/University ID (UID) Number:***

***Address:***

P.O. Box, Street, or Rural Route City State Zip

***Phone Number****:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***U-High/ISU E-mail Address****:*

***Parent/Guardian:***

Last First Middle

***Address:***

P.O. Box, Street, or Rural Route City State Zip

***Phone Number****:* ***E-mail Address****:*

***High School:*** University High School Normal Illinois

***Graduation Date: U-High Counselor:***

(Month/Year)

***Applying for:*** Year □Fall □Spring □Summer □New Student □Continuing Student

***ISU Course Requests***

(For the upcoming semester only)

***1st choice***

Course Title Department & Course # Section # (or time)

***2nd choice***

Course Title Department & Course # Section # (or time)

***3rd choice***

Course Title Department & Course # Section # (or time)

***Student Signature:*** **Date:**

***Parent Signature:*** **Date:**

***U-High Counselor Signature*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

By signing, you acknowledge that the above student is interested in taking these courses at Illinois State University, which will result in tuition charges. Completing courses at the University will result in establishing an Illinois State University grade point average (4.0 GPA Scale), which will **remain** on the student’s academic record at the University.

Additionally, you acknowledge that completing this form **does not guarantee enrollment** in the above courses.Course registration is also dependent upon meeting appropriate University prerequisites for courses as well as course availability. The student will register for courses on <https://my.illinoisstate.edu/>.

\*Please note, Dual Enrollment students must apply to the University at <http://admissions.illinoisstate.edu/apply/>.