



Dual Enrollment Access Academy Enrollment Form

Name: _____ Date of Birth: _____ Graduation Year: _____ Number of Desired Courses: _____

Email: _____ Cellphone Number: _____ High School: _____

NOTE:

- **Home school students may skip the school district portions of this form**
- Students may choose to rank one or more courses. See the [Dual Enrollment Access Academy website](#) for course list and credit amounts

<u>Student</u>				<u>School district representative</u>			
Course	Credit Amount	Cost per Credit	Total Cost	Cost covered by school	Cost passed to student/family	Will high school credit be granted?	Will the school order textbooks?
		x \$200 per credit	\$	\$	\$		
		x \$200 per credit	\$	\$	\$		
		x \$200 per credit	\$	\$	\$		
		x \$200 per credit	\$	\$	\$		

This student has the permission of the high school administration to enroll in the approved courses listed above.

_____ *School District Approval Authority signature & date*

_____ *High School Counselor/Advisor signature & date*

- I understand that **I and/or my family may be responsible for paying part of the tuition** for the above courses.
- By signing below, I certify that the information in this application is true and complete to the best of my knowledge. I understand that inaccurate information may affect my eligibility to enroll.
- If I enroll in The Dual Enrollment Access Academy, I agree to abide by all regulations, policies, and procedures.
- I understand that taking these courses will become part of my permanent university record and may affect my subsequent eligibility for admission to post-secondary institutions.
- I authorize UW-Green Bay to provide information about my course registration, grades and attendance to my high school, school district administrator and school board.

_____ *Student signature & date*

_____ *Parent/Guardian/Foster Parent signature & date*