

**CARSON CITY SCHOOL DISTRICT  
APPLICATION FOR DUAL CREDIT CLASS**

Name \_\_\_\_\_ DOB \_\_\_\_\_ Date \_\_\_\_\_

Student ID # \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_

In order to be granted high school credit for courses completed at Western Nevada Community College, certain guidelines must be followed. Please read the following, initialing each line to indicate your understanding, and obtain the appropriate signatures.

To qualify to enroll in a dual credit class, I understand:

\_\_\_\_\_ I must have obtained Junior or Senior status by the beginning of the school year.

\_\_\_\_\_ I must have achieved the minimum high school GPA required to enroll at WNCC.

\_\_\_\_\_ I am responsible for all registration and course fees as well as transportation to and from the class.

\_\_\_\_\_ If admitted to a dual credit class, all policies and procedures of the college apply to me.

\_\_\_\_\_ I am responsible for providing a copy of my college transcript to the high school upon completion of the class.

Please indicate the course(s) in which you are applying to enroll: Term \_\_\_\_\_ Year \_\_\_\_\_

<u>Number</u>	<u>Section</u>	<u>Title of Class</u>	<u>Credits</u>	<u>Day(s)</u>	<u>Time</u>	<u>Instructor</u>

Required Signatures:

Student \_\_\_\_\_ Parent \_\_\_\_\_

Counselor \_\_\_\_\_ Date \_\_\_\_\_

School Administrator \_\_\_\_\_ Date \_\_\_\_\_