

Dual Credit Enrollment Application (Non-concurrent)

College/University:

- Great Basin College
 Truckee Meadows Community College
 University of Nevada, Reno
 Western Nevada College
 College/University outside of Nevada

The College/University must be in Nevada. If the course is not found within a Nevada College/University, the WCSD Student Accounting Department Director must approve the enrollment. Enrollment will not be approved, and credit will not be given if the course can be found within an NSHE institution. Per NRS 389.160.

Term:

- Fall
 Spring
 Summer
 School Year: _____

Student Information:

Student's Name: _____ Date of Birth: _____

Mailing Address: _____

Telephone Number: _____ Student's E-mail Address: _____

High School Name: _____ Student's Cumulative GPA: _____

Grade: _____ Graduation Senior Yes No Gender: Female Male non-binary

Ethnic Background:

- American Indian or Alaskan Native
 Asian
 Black or African American
 Native Hawaiian or other Pacific Islander
 White

Dual Credit Course:

Please indicate the course(s) in which you are applying to enroll

Call No.	Dept.	Course No.	Section No.	Course Title

To qualify for the Dual Credit Program, I understand:

- I must have obtained HS status by the beginning of the school year. Dual Credit courses are available to high school students (9-12).
- I am responsible for providing my own transportation to and from the Dual Credit class.
- A Dual Credit course may be applied only to elective high school credit, unless specified for academic credit in the posted Dual Credit List.
- I must pay the costs of college enrollment for the class, including any application fees, class fee, and textbook costs.
- Registration is not complete until all fees, if any, are paid. I am responsible to pay fees by the published deadline date.

- I am considered an admitted student and as such, all policies and procedures as outlined in the college course catalog apply.
- Grades earned in Dual Credit courses will be averaged into my semester GPA. Dual Credit will not be awarded retroactively.
- I must have approval from the persons listed below:

Student's Signature: _____ Date: _____

Signature indicates understanding of the above requirements and obligations.

Parent's Signature: _____ Date: _____

Signature indicates understanding of the above requirements and obligations.

Counselor's Signature: _____ Date: _____

Signature indicates counselor has reviewed the Dual Credit Program with the student, including requirements, obligations, and restrictions and has verified the student's eligibility to enroll.

Principal/Curriculum Assistant Principal Signature: _____ Date: _____

Signature indicates verification of student's GPA and that this course is NOT offered at the student's home high school.

Family Educational Rights and Privacy Act (FERPA)

Each educational institution is required by federal law (FERPA), regardless of age or grade level, to keep student records confidential. Without the parents' express permission (or that of a student 18 or over), WCSD cannot share student records with anyone but the student and parent (or appropriate school district employees). And without the student's express permission, Post-Secondary Institutions cannot share student record with anyone but the student (or appropriate college employees, high school employees, or dual credit instructors). Parents or guardians must be authorized to view student records.

Family Rights and Privacy Act (FERPA)
Parent and Student: Sign here to approve that WCSD and the Nevada university or college in which you enroll may disclose your student records to either WCSD or the institution in which you enroll.

Parent Signature: _____ Student Signature: _____

Liability

I hereby expressly relieve, indemnify, save, hold harmless, and agree to defend the Washoe County School District ("District"), and its respective trustees, administrators, managers, coaches, employees, agents, heirs, family members, assigns, representatives, affiliated persons, volunteers, sponsors, groups and others acting on their behalf (hereafter referred to collectively as the "Releasees") from and against any and all liability, claims, losses, costs or expenses to the person or property of another, lawsuits, judgments, and/or expense, including attorney fees, arising from injury, illness, or damage, including property loss or damage, suffered or incurred by my student as a result of the acts, omissions, or conduct of any Releasee, which may occur during or which may arise out of the with my student attending the University/College through the Dual Credit Program.

Parent Signature: _____ Student Signature: _____