

CAREER TECH DUAL ENROLLMENT

How to apply for admissions online:

Go to www.wallacestate.edu

Hover over the **Admissions** tab

Select **Apply Online** in the drop down

Click on **ONLINE APPLICATION**

Select the **Apply for Admission** tab

Select the **First time user account creation** under the Login button

Read the instructions

Create a Login ID and PIN (DE students - we suggest using the first four letters of your last name and the last four numbers of your social security for your Login ID and your six digit date of birth for your PIN)

Select **Dual Enrollment** in the drop down for Application Type

Select the term you plan to begin taking courses

A check list will come up--Please complete each item on the checklist. Each time you complete an item on the checklist, click **checklist at the bottom** and it will take you back to the checklist menu

Select Program of Study--When you come to the Program of Study on the check list it indicates to select High School Student for Dual Enrollment Student, however, there is not a High School Student option, please select **the major for the program in which you plan to begin (ie -EGT for Engineering Technology)**

Select High School Code from search and drop down--On the High School Checklist, **make sure to include your estimated high school graduation date**

Upon completion of the checklist items, select **Application is Complete**

Select **I agree to the terms** – Click **Submit**

Print the signature page (residency form) – or complete the copy included in the application packet

Include your **student number** on the front of your application packet. Log in to myWallaceState using your SS# and 6-digit DOB; click **Student** tab, then **Student Records**, then **View Holds** to find your student number listed in the top right-hand corner of screen.

Additional required documents: Attach the signature page (residency form), copy of your driver's license, ACT or ACCUPLACER test score, Kuder Interest Assessment, EFC, and Essay. The high school counselor will complete the remainder of the application packet and attach a high school transcript.



WALLACE STATE

HANCEVILLE

Career Technical/Health Dual Enrollment Scholarship Application

Name: _____
 First Middle Last

Mailing Address: _____
 Street or Box Number City State Zip Code

E-Mail: _____

DOB: _____ Age: _____

Home Phone: _____ Cell Phone: _____

High School: _____ Grade (please choose for upcoming school year): 11th 12th

Program of Study (*Eligible Programs Listed on Page 3*): _____

| | |
|---|--|
| ✓ | <p>Checklist: Applicants Must Include All of the Following Documents with Application</p> |
| | <p>WSCC Student Number: _____ Students must complete Wallace State's online admissions application in order to receive a student number. It may take up to 48 hours to process your application. http://www.wallacestate.edu/admissions/apply-online Log in to myWallaceState using your SS# and 6-digit DOB; click Student tab, then Student Records, then View Holds to find your student number listed in the top right-hand corner of screen.</p> |
| | Copy of Driver's License |
| | Completed Residency Form |
| | Current High School Transcript – GPA of 2.5 Required |
| | Counselor Recommendation Form |
| | KUDER Interest Assessment |
| | EFC: Complete the FAFSA and attach the EFC to the application packet before submitting. You will find the EFC on the last page of your FAFSA confirmation. |
| | Essay: Essay, 600 words or less, stating reason student is interested in chosen career field and his/her plans for the future. |
| | Accuplacer Placement Exam or comparable ACT scores. To waive the placement exam, students must have an ACT score of 18 or higher in English and 20 or higher in math and reading. Testing department hours of operation: 8:00 am – 1:30 pm, Monday – Thursday or otherwise published |

**** Incomplete applications will not be considered. Failure to provide accurate contact information on this form could cause students to miss out on scholarship opportunities. ****

1. **Student must return completed application with attachments to the counselor before the deadline.**
 - **Deadlines: Summer or Fall entry – March 13, 2017**
 - Counselor will complete recommendation, attach required documents, and submit application to WSCC by **March 20, 2017**
2. **Student must attend a mandatory orientation session – Thursday, April 4, 2017 at 6:00 p.m.**

Career Technical/Health Dual Enrollment Scholarship Application cont.

Permission for Access to Educational Records: *(student initials required after each statement)*

I hereby give my permission for the Wallace State Community College to have access to any school records to determine eligibility for the program. I authorize Wallace State Community College to release to the high school listed on this application all grades earned in career technical dual enrollment courses at Wallace State Community College. _____ (initial)

I grant permission for Wallace State Community College representatives to discuss all my student records with the following persons while I am enrolled in career technical dual enrollment courses _____ (initial)
(Please check all that apply).

parents/guardians high school representatives companies with which I receive internships/apprenticeships

This is in compliance with the Family Educational Rights and Privacy Act of 1974, as provided by Public Law 93-380.

I understand that all dual enrollment grades earned will appear on my permanent college transcript. _____
(initial)

Cost of Program:

Tuition and fees for select programs will be paid using WFD funds (Career Technical/Health Dual Enrollment Scholarship). The scholarship pays for **two** classes each semester up to a maximum of 6 college credit hours as long as funds are available. Books, materials, and supplies are the responsibility of the student. Students who choose to enroll in programs which are not included on this list will be responsible for all tuition, fees, books, materials, and supplies. Wallace State has been selected to participate in an experimental pilot program regarding Federal Pell Grants. The experimental pilot program is limited to Alabama public high school students in the WSCC service area. Qualified students will be able to use Pell funds beginning fall semester. WSCC graduation fee \$30. _____ (initial)

Continuous Eligibility:

Students who meet the criteria for initial admission to a Dual Enrollment for Dual Credit program as specified in the ACCS procedure for Dual Enrollment for Dual Credit for High School Students, Section 2, will remain in continuous eligibility as long as a grade of "C" or better in all attempted college courses is earned. Students who fail to meet this minimum grade requirement or who withdraw from a course will be suspended from the program for a minimum of one term. The one term suspension may not be served during the summer term. The student may not re-enroll until the suspension has been served. For re-entry, the student must reapply and meet the minimum (unweighted) grade point average of 2.5 for Career Technical or 3.0 for Academic. Students re-entering will be responsible for repeated courses and all cost for tuition, fees, books, material, and supplies. _____ (initial)

Applicant Signature

Date

Parent/Guardian Signature

Date

It is the policy of the Alabama State Board of Education and Wallace State Community College, a postsecondary institution under its control, that no person shall, on the grounds of race, color, sex, religion, national origin, disability or age, be excluded from participation in, be denied benefit of, or be subjected to discrimination under any program, activity, or employment.

Career Technical/Health Dual Enrollment Scholarship Application cont.

Program selection should be written on front of application. Please select from the following programs:

- Air Conditioning/Refrigeration – ACR (excludes special topics)**
- Automotive Manufacturing Technology – AUT**
- Industrial Electronics Technology – ILT**
(Biomedical Tech., Mechatronics, Technology Communications)
- Machining – MTT**
- Welding – WDT**

The following programs may or may not have course options that will work in a high school schedule. If interested, please contact the department to find out how scheduling might work for you. Students may only begin these programs during the fall semester.

- Emergency Management System – EMS (ACT = 17; must turn 18 first semester)***
- Medical Assistant – MAT (ACT = 17)***
- Pharmacy Tech – PHM (must turn 18 first semester)***

*Students interested in any listed health programs must also submit a completed health program application to be considered. Scholarship acceptance will be contingent upon student's acceptance into the health program.

^Students interested in EMS or Pharmacy Technology must turn 18 within their first semester of admission in order to be eligible for the program.

Eligible programs are determined by the State Board of Education and the local workforce development agency and are subject to change. If changes are made, updated program lists will be supplied to the local high school.

Career Technical/Health Dual Enrollment Student Recommendation Form

School Recommendation

To be completed by high school personnel only.

Student Name: _____ High School: _____

This survey contains a number of statements or questions about the applicant. Please submit this to a teacher for his or her evaluation. Your answers will be kept confidential.

| <i>Please rate the following from 1 (poor) to 5 (excellent)</i> | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| 1. Applicant exhibits good study skills. | | | | | |
| 2. Applicant behaves well in class (consider number of disciplinary referrals). | | | | | |
| 3. Applicant has a satisfactory attendance record. | | | | | |
| 4. Applicant exhibits mature behavior to integrate onto a college campus. | | | | | |
| 5. This applicant would benefit from participation in the CTDE Scholarship Program. | | | | | |

If there is space available at the local career center and/or the student has not completed all courses that are available for articulated credit, the student should attend classes at the career center before enrolling at WSCC.

Has the student completed all classes that can be taken at the career center? Yes No

Comments: _____

Counselor Signature: _____ **Date Signed:** _____

Principal Signature: _____ **Date Signed:** _____

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**THE ALABAMA COMMUNITY COLLEGE SYSTEM
CERTIFICATION OF ELIGIBILITY
FOR IN-STATE AND OUT-OF-STATE RESIDENCY**

Student Name: _____ Student # or SS#: _____ - _____ - _____

Current Address: _____

City: _____ State: _____ County: _____ Zip: _____

Please read the following statements and check the one statement that applies to you. Your signature is required. The form may be faxed to the Admissions Office (Fax 256/352-8129) or mailed to Wallace State Community College - ATTENTION: Admissions - (P.O. Box 2000, Hanceville, AL 35077-2000).

1. I qualify as an in-state resident.
2. I am currently considered an out-of-state student. I certify that I do not meet any requirements to be classified as an in-state student. **An out-of-state student cannot attain resident status simply by attending school for twelve months in the State of Alabama.**
3. I have currently lived in the State of Alabama for less than 12 months. However, I certify that I possess "more substantial connections" with the State of Alabama than any other state.

If #3 is selected, you are required to provide the following to the Admissions Office for certification before the in-state tuition rate is official.

1. Payment of Alabama state income taxes as a resident.
2. Ownership of a residence or rental property in the state.
3. Full-time employment in the state (self, spouse, or supporting person).
4. Voter registration and voting in the state.
5. Possession of state licenses (driver's license and state license plates).

Other special circumstances will be considered on an individual basis.

I understand that in order to be eligible for resident tuition rates, the burden of proof lies with me. Appropriate documentation is attached in support of my request for eligibility for resident tuition rates. I agree to notify the college if there are any changes in the information submitted with this form.

Signature of Student

Date