Maryville High School
Early College Experience Course Application
(For any college courses pursued by M.H.S. students)

Student's Full Name _____**Grade Level** _____

(at time course will be taken)

Student Cell Phone Number _____

Semester/Year Course Will Be Taken _____Fall/2019 _____Spring 2020

College(s) Offering Credit_____

College Course Title(s) and Number(s)

Fall Term	_Spring Term_
_____ **English 1010 (PSCC)**	_____ **English 1020 (PSCC)**
_____**English Comp and Speech I 110 (MC)**	_____**English Comp and Speech II 120 (MC)**
_____ **Psychology 1030 (PSCC)**	_____ **Psychology 1030 (PSCC)**
_____ **Biology 1110 (PSCC)**	_____ **Biology 1110 (PSCC)**
_____ **College Success 1500 (PSCC at MHS)**	_____**Probability and Statistics 1530 (PSCC at MHS)**
_____**Probability and Statistics 1530 (PSCC at MHS)**	_____**Calculus 1830 (PSCC at MHS)**
_____**Calculus 1830 (PSCC at MHS)**	_____**DE Criminal Justice III 2020 (RSCC)**
_____**Contemporary Global Issues 201 (MC)**	_____ **Government & Politics 122 (MC)**

_____**Other Courses Not Listed** _____**Other Courses Not Listed**

Please verify:

- ❑ I have the minimum ACT or PLAN requirements of 19 subscores and composite.
- ❑ I have a 3.0 GPA.

Student Responsibilities:

1. Complete an **Early College Experience Course Application** <mark>(print and return to Mrs. Burchfield in room 331 no later than March 1, 2019.)</mark>
2. Complete the college requirements for acceptance in a dual enrollment course.
   A. Complete an Application for Admission. In order to be a college student, you **MUST APPLY TO COLLEGE.** You can do this through the tabs on the Dual Enrollment web site.
   B. Complete the Hepatitis B Immunization form. This must be signed by parents. <mark>(This form must be given to Mrs. Burchfield in room 331 **no later than March 1, 2019)**.)</mark>
3. Complete the Dual Enrollment Grant application. (See the tab on the Dual Enrollment web site.) <mark>(Print and return a copy of the dual enrollment grant to Mrs. Burchfield in room 331 **no later than March 1, 2019.**.)</mark>
4. Register for classes after acceptance into the Maryville High School Early College Experience Program and the college of choice.
5. If all deadlines are met, Mrs. Burchfield will submit transcript, ACT scores and Hepatitis B forms to the college of choice.

_____   _____
Student Signature/Date   Parent Signature/Date

RETURN COMPLETED FORM TO Mrs. Burchfield in room 331 by Friday, March 1, 2019

The Principals reserve the right to deny release time for a student to participate in Early College Experience.