

Application for Admission

www.columbiastate.edu
Office of Admissions
1665 Hampshire Pike
Columbia, TN 38401



Columbia State
COMMUNITY COLLEGE

Dual Enrollment Application for Admission For High School Juniors and Seniors

How do I apply?

Step 1 Please complete this form by printing clearly in ink or by typing.

Step 2 Remember to have appropriate signatures on the Admission Application, Hepatitis B Immunization Health History Form, and the Consent Form.

Step 3 You may submit your application in person at any Columbia State campus or may mail your application to:

**Columbia State Community College
Office of Admissions
1665 Hampshire Pike
Columbia, TN 38401**

Step 4 Request that all official supporting documents such as high school transcripts, consent forms and ACT scores be sent directly to the address above or faxed to 931-560-4125. *Official documents are those received from the issuing agency/institution by mail, fax or in person. All submitted documents become the property of the college and cannot be returned or forwarded.*

What else is required?

New applicants are required to submit a \$10 non-refundable, one-time application fee payment with this application.

To be considered for the Dual Enrollment Grant, students must also complete a Grant Application form prior to each semester by Tennessee Student Assistance Corporation (TSAC) deadlines.

**TDD Relay Number: 1-800-848-0298
Office of Admissions: 931-540-2790
Fax: 931-560-4125**

Columbia State Community College, a Tennessee Board of Regents Institution, is an equal opportunity, affirmative action institution. Individuals needing this material in an alternative format should contact the associate vice president for students services or the appropriate program director.

To be eligible for Dual Enrollment, the following must be met:

- The student must be a **junior** or **senior** in public, private, or authorized home-school (freshman and sophomores must complete the regular Application for Admission as “academically talented/gifted”).
- The student must have a 3.0 cumulative high school GPA **OR** a National ACT/PLAN 19 Composite score.
- Students wishing to take courses with prerequisites (such as math, math-related science courses, English, speech, and literature courses) must meet placement requirements as follows NO EXCEPTIONS:

<u>College Subject</u>	<u>ACT</u>	<u>SAT</u>	<u>COMPASS</u>
math & related sciences	19 + math	460 + math	38-39 math
reading intensive	19 + reading	460 + verbal	83-89 reading
English & speech	18 + English	460 + verbal	77-99 writing

Other Important Information

- Once admitted to the Dual Enrollment program, students are expected to follow all college policies and are required to maintain a 2.0 cumulative GPA in college or they will not be able to continue in the program.
- It is the student’s responsibility to consult with the high school and/or local board of education to see how courses will count toward the student’s high school graduation and/or be posted to the high school transcript.
- Dual Enrollment students may not take Learning Support classes.
- Unless otherwise approved by the high school, students may take their college classes at any Columbia State location at the days/times designated in the semester schedules.
- Dual Enrollment students must attend the classes for which they are registered. If the student does not plan to attend the class or something changes in the student’s schedule, it is the student’s responsibility to officially drop the course(es).
- Once admitted to the Dual Enrollment program, the college does not track the student’s high school GPA. However, students should consult with their high school regarding any high school GPA requirements for continuation in Dual Enrollment.
- Dual Enrollment students taking college classes are assessed the same fees and discounts as any other student. Dual Enrollment students once admitted are eligible for the Dual Enrollment Grant if submitted to the Tennessee Student Assistance Corporation (TSAC) by the required deadlines. High school students are NOT eligible for federal financial aid or college scholarships. After graduation from high school, students are then eligible for federal and college aid.
- Students wishing to continue with Columbia State after graduation from high school must complete the regular admission application and be admitted to the college as a regular student.

Consent for Dual Enrollment

Parental / Guardian Consent:

I give permission for _____ to take Dual Enrollment classes with
(print applicant's name)

Columbia State Community College. I understand that grant or other financial support for Dual Enrollment may not completely cover costs. I understand that I will be responsible for payment of tuition, fees, books, and any other materials and expenses associated with these classes. I understand that, due to federal regulations, federal aid (such as Pell grant) and regular college scholarships are not available for Dual Enrollment students.

I understand that account billing will occur through email notifications, and no paper bills will be mailed. I understand that to ensure prompt account information is received, I can provide an email address for the person responsible for this student's billing account.

Parent/Guardian Signature

Date

Billing Email Address (please print)

Applicant Consent:

I give my permission for Columbia State Community College to release information to _____

and/or _____, my legal guardian(s), regarding attendance, final grades, dual enrollment grant and fee payment information **until high school graduation.**

Applicant Signature

Date

Principal / Guidance Counselor Consent:

- I certify that the above named student has my permission to participate in the Dual Enrollment program provided by Columbia State Community College.
- This student's Grade Point Average (GPA) is _____ on a 4.0 scale.
- I understand that I must provide an official high school transcript and National ACT/PLAN/SAT scores. *You may fax (931-560-4125) directly to Admissions, mail or send with student in a sealed, unopened envelope any transcripts, scores and the consent form.*

Principal or Guidance Counselor

Date

OFFICE USE ONLY:

Application Entry: Staff _____ Date _____
Application Fee Payment: Check Name _____ Number _____ Cash _____ Credit Card _____



Return form to: Columbia State Community College
Office of Admissions
1665 Hampshire Pike
Columbia, TN 38401
TDD Relay Number: 800-848-0298
Phone: 931-540-2790
Fax: 931-560-4125

Hepatitis B Immunization Health History Form

Name: _____
Last First MI

Date of Birth: _____ Social Security Number*: _____ - _____ - _____
Month/Day/Year

Hepatitis B Health History Information

The General Assembly of the State of Tennessee mandates that each public or private postsecondary institution in the state provide information concerning Hepatitis B infection to all students matriculating for the first time. Tennessee law requires that such student complete and sign a waiver form provided by the institution that includes detailed information about the disease. The required information below includes the risk factors and dangers of the disease as well as information on the availability and effectiveness of the vaccine for persons who are at-risk for the disease. The information concerning this disease is from the Centers for Disease Control and the American College Health Association.

The law does not require that students receive vaccination for enrollment. Furthermore, the institution is not required by law to provide vaccination and/or reimbursement for the vaccine.

Hepatitis B (HBV) is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. The disease is transmitted by blood and or body fluids and many people will have no symptoms when they develop the disease. The primary risk factors for Hepatitis B are sexual activity and injecting drug use. This disease is completely preventable. Hepatitis B vaccine is available to all age groups to prevent Hepatitis B viral infection.

A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to confer lifelong immunity in most cases.

- I hereby certify that I have read this information and I have received the complete three dose series of the Hepatitis B vaccine. Date of completion of the Hepatitis B vaccination series: ____/____/____
- I hereby certify that I have read this information and I have elected to receive the Hepatitis B vaccine and/or I am in the process of receiving the complete three(3) dose series of the Hepatitis B vaccine.
- I hereby certify that I have read this information and I have elected not to receive the Hepatitis B vaccine.

Signature of Student or Parent/Guardian (If student is under 18): _____

Date: _____

For more information about the Hepatitis B disease and its vaccine, please contact your local health care provider or consult the Center for Disease Control and Prevention Web site at (www.cdc.gov/health/default.htm).

* In accordance with the Privacy Act of 1974, please be advised that the requested disclosure of your Social Security Number is voluntary and optional. Your Social Security Number will not be disclosed to individuals or agencies outside of the institution except in accordance with the institutional policy on student records.

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