BROWARD COLLEGE
www.broward.edu

Application for Admission to Dual Enrollment or Early Admission Program

Please type or print clearly in ink.

EMPLOYEE INITIALS DATE	TERM

Social Security Number_____ *(Check one)* ❑ Male ❑ Female

Legal Name _____
LAST FIRST MIDDLE

Street Address _____

City/State/Zip _____ Expected Graduation Date _____

Phone _____ Cell/Other Phone _____ E-Mail _____

Birthdate _____ Birthplace _____

Country of Citizenship _____

High School _____

Anticipated High School Graduation Date _____

Term Applied to Broward College *(Check one):*

❑ Term 1 (Aug.-Dec.) ❑ Term 2 (Jan.-May) ❑ Term 3 (May-Aug.) Year _____

Race: (You may check one or more race categories, if applicable)
❑ Asian
❑ Black or African American
❑ American Indian or Alaskan Native
❑ Hawaiian or Pacific Islander
❑ White

Ethnicity:
❑ Hispanic
❑ Non-Hispanic

Program type *(Check one):*
❑ Dual Enrollment ❑ Early Admission

Good Conduct Certification

I understand that if I have experienced disciplinary problems at another educational institution or with other authorities (not including minor traffic violations), I must state the circumstances on a separate sheet and submit it with this application. I understand that this information will not necessarily exclude me from admission and will be handled confidentially. I authorize the college to obtain any of my Florida public school/college records and test scores. I agree to the release of any transcripts and test scores to this institution, including score reports that may be requested from the College Board or ACT. I certify that all statements given in this application are true and accurate to the best of my knowledge. I agree to abide by the Academic Honesty policy and all other rules and regulations of Broward College.

_____ _____
SIGNATURE OF STUDENT SIGNATURE OF PARENT (IF STUDENT IS UNDER 18 YEARS OF AGE)

Florida Residency

❑ I certify that I qualify as a resident of Florida for tuition purposes and that I have resided in Florida for the past 12 months or longer. (Residency qualifications are found in the ***Broward College Catalog.)***

❑ I have **not** resided in Florida as a permanent resident for the past 12 months.

SIGNATURE - Parent or Legal Guardian _____

Parent Consent

I have read the Dual Enrollment/Early Admission information, been advised of the procedures involved in entering the program, and completely approve of my dependent's participation. I further understand that Dual Enrollment/Early Admission students must meet and maintain academic requirements for Broward College and all Broward County School Board Policies.

SIGNATURE - Parent or Legal Guardian _____ Date _____

STUDENT PLEASE COMPLETE: NAME
LAST FIRST MIDDLE FORMER
SOCIAL SECURITY NUMBER