



CONCURRENT ENROLLMENT

(High school students enrolled at DCC while still in high school – not part of dual enrollment contract)

1. To attend Danville Community College you must be a high school junior or senior. Special permission from the College President is necessary for enrollment of high school students with freshman and sophomore classification. This permission will be granted after review of the Admissions Committee.
2. Complete an Online DCC Admissions Application at www.danville.edu/apply. Once you receive confirmation that the application has processed, print the confirmation page and have your parent sign it and attach to this form.
3. All students must prove eligibility for placement in a dual enrollment course. Please submit the student’s current high school transcript, showing current grade level and cumulative GPA. Cumulative GPA will be used to determine course eligibility per the Dual Enrollment Student Admissions policy posted in the DCC College Catalog (<https://catalog.danville.edu/>).
4. Complete and sign this form. Have your Parent,/Legal Guardian approve/sign this form, and obtain the signature of your principal before submitting this form to the College. Bring all completed forms to the Admissions Office, Wyatt Building Room 108 or email dualenrollment@danville.edu. For additional information call the Admissions Office at 434.797.8538.
5. Please allow five (5) business days for your course request to be approved for registration. No Concurrent Enrollment forms will be accepted after the start of classes for each term.
6. Once you are approved for the course, the Admissions Office will register you and you will need to pay tuition for the course by 5 p.m. on the day you are registered. Tuition can be paid in person, online at MyDCC or by calling the DCC Business Office at 434-797-8418.

For more information, visit: www.danville.edu/dual-enrollment.

STUDENT INFORMATION:

Name: _____
First Name Middle Name Last Name (Siffix-Jr., #rd)

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

DCC ID/EMPLID#: _____ Phone Number: _____

Name of High School: _____ Grade Level: _____

Signature of Student: _____ Date: _____

Signature of Parent/Legal Guardian: _____ Date: _____

Desired semester: Fall (Aug. – Dec.) 20__ Spring (Jan. – May) 20__ Summer (May-July) 20__

REQUESTED CLASSES at DCC

Course Subject	Course Number	5 digit Class ID#	Course Section	Course Title	Number of Credits
EXAMPLE: ITE	101	67589	50	Intro Microcomputers	1

This student has the approval of our high school to enroll in classes at Danville Community College.

Signature of Principal: _____ Date: _____

DCC Office Use Only:

Admissions Committee approved does not approve the above request. COMMENTS: _____