



# Ozarka College

## DUAL/CONCURRENT ENROLLMENT FORM

Student Name \_\_\_\_\_

Student ID # (Nine Digit #) \_\_\_\_\_

High School \_\_\_\_\_

ACT	ACCUPLACER	ASPIRE	COMPASS
Date: _____	Date: _____	Date: _____	Date: _____
_____ English <b>(19)</b>	_____ Sentence Skills <b>(83)</b>	_____ English <b>(428)</b>	_____ Math <b>(41)</b>
_____ Math <b>(19)</b>	_____ Reading <b>(78)</b>	_____ Reading <b>(428)</b>	_____ Writing <b>(80)</b>
_____ Reading <b>(19)</b>	_____ Math <b>(Elementary Algebra 77+)</b>	_____ Math <b>(432)</b>	_____ Reading <b>(83)</b>
_____ Science			
_____ Composite			

### COURSES

(\*Only college courses which apply to High School graduation requirements are eligible for the concurrent/dual enrollment reduced tuition rate.)

Course Name	Section	Concurrent* or Dual Enrollment** Course	Instructor

**Concurrent Enrollment\***: Course taken at the high school during school hours taught by high school faculty.

**Dual Enrollment\*\***: Online or other course taught by Ozarka College faculty.

I have discussed dual/concurrent credit with this student and certify that the course(s) listed above will apply to graduation requirements at our school:

\_\_\_\_\_  
Counselor or Principal

\_\_\_\_\_  
Date

I agree to be enrolled in the above courses and submit payment by the college's deadline.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\*\*\*To receive discounted tuition rate for dual credit courses, this form must be completed and returned to the Ozarka College Finance Office prior to the end of the first week of classes for each semester the student is enrolled. For specific dates, please refer to the Ozarka College Website.

For Official Use Only: \_\_\_\_\_ Received \_\_\_\_\_ Financial Aid \_\_\_\_\_ Business Office