Seminole State College
CONCURRENT ENROLLMENT FORM

PO Box 351
Seminole, OK 74818-0351
Phone: 405-382-9230

This is to certify that ____________________________________________ is classified as a   SR. JR.  
(please circle)

at ____________________________________ High School and is or will be enrolled in ______ units.

Concurrent high school students must be eligible to satisfy the high school curricular requirements for college admission no later than the spring of their senior year. A high school student admitted under the provisions set forth below may enroll in a combined number of high school and college courses per semester not to exceed a full-time college work load of 19 semester credit-hours. A high school student may enroll in a maximum of 9 semester credit hours during a summer session following the end of his/her junior year of high school. A high school student must meet the following requirements for admission:

A.  The student must have taken the ACT test:
   Seniors must have an ACT composite score of 19 OR a 3.00 GPA and a 19 ACT in the area of enrollment.
   Juniors must have an ACT composite score of 21 OR a 3.50 GPA and a 19 ACT in the area of enrollment.
B.  The student cannot enroll in zero-level or remedial courses.
C.  The student must maintain a grade point average of 2.00 on a 4.00 scale to be eligible for continued concurrent enrollment.
D.  A copy of the student’s high school transcript and ACT scores must accompany the concurrent form.

I have read and understand the provisions set forth by Seminole State College for my concurrent enrollment. I accept the condition that I must be concurrently enrolled in high school for my college enrollment to be valid. I also understand that I must submit a complete, official transcript from my high school showing high school graduation if I continue my attendance after graduation. My enrollment will be accepted by Seminole State College upon payment of student fees and the submission of all the information requested above.

I understand that student records are released only in accordance with institutional policy as provided by the Family Educational Rights and Privacy ACT (as amended). Seminole State College reserves the right to cancel classes.

Student Signature ____________________________________________ Date______________

A.  I certify that this student is eligible to satisfy requirements for graduation from high School (including curricular requirements for college admission) no later that the spring of his/her senior year.

High School Principal’s Signature ________________________________ Date______________

B.  I have reviewed this student’s academic records and have met with the student and determined that he/she is a good candidate for the concurrent high school student program. I recommend that this student be allowed to enroll in _________credit hours at Seminole State College for the _________semester.

High School Counselor’s Signature ________________________________ Date______________

C.  I grant my permission for my dependent child to enroll concurrently at Seminole State College. I understand that he/she must abide by the regulations set forth by this document.

Parent or Legal Guardian’s Signature ________________________________ Date______________

D.  I grant permission for my high school records office, upon its request, to receive my official transcript at the end of the semester.

Student’s Signature ____________________________________________ Date______________

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