

Dual Enrollment Registration and Authorization Form

Section A: TO BE CON	MPLETED BY STUDENT		
Student Name:Academic Year:		Student ID#:	
		Term:	
Course Code	C	ourse Name	Semester Hours
Total Semester Hours	::		
Signature of Student		Date	
SECTION B: TO BE CO	MPLETED BY HIGH SCH	HOOL COUNSELOR OR PF	RINCIPAL
Authorization From		High School	
Tennessee Wesleyan Universithe high school and the papermission granted from the student's progress in e	ersity. The student above met rents will monitor the student he student and parents, facilit ach DE class in order to assure ely fashion. The above courses	above named student to be grai admissions criteria for Tennesse t's grade point average for conti ated by signed FERPA waivers, t a that said student is performing s will meet necessary criteria for	e Wesleyan University. Both nued eligibility. With the high school will monitor g class assignments and
Signature of Guidance Cou	Inselor or Principal Date	Student's grade level	
SECTION C: TO BE CO	MPLETED BY PARENT (OR LEGAL GUARDIAN	
Wesleyan University, prior understand that this is his/ courses taken by the stude the student's responsibility	to high school graduation as a her responsibility to fulfill the ent. I further understand that t	to enroll in dual enrollman Dual Enrollment student (as specification requirements of said college in the responsibility to fulfill the collive the principal or guidance conduct the course.	pecified above). I further order to earn credit from llege course requirements is
Signature of Parent/Legal Guardian		 Date	

SECTION D: TO BE COMPLETED BY STUDENT AND PARENT OR LEGAL GUARDIAN

TENNESSEE WESLEYAN UNIVERSITY PROMISSORY NOTE

In order to be able to complete the registration process a schedule, you must choose one of the following paymen	
Payment in full	
Deferred Payment Plan: I wish to pay the down pay the remainder of my bill. (See Deferred Payment Pl	ment amount and use the deferred payment plan to pay for an below)
Commit Dual Enrollment Grant: I want to use my D balance using the deferred payment plan (See Defe	Dual Enrollment Grant to pay my bill and defer any remaining erred Payment Plan below).
full, the student either must enter into a payment plan w Enrollment Grant. I further acknowledge that it is the re Grant and failure to do so by ascribed deadlines will resu courses. I also acknowledge that the Dual Enrollment G enrollment classes, and \$100 per credit hour for classes 6	sponsibility of the student to complete the Dual Enrollment Ilt in the student being billed in full for the registered rant will pay up to \$513 for the students first five dual 5-10, resulting in a cost of \$213 per 3-hour course. Finally, I I class fees associated with certain courses that will be not
1.5% finance charged being charged to my account or malso understand that by entering the settlement agreem	at failure to pay within 30 days of that date may result in a y account being referred to a third-party collection agency. I nent I will avoid the account being turned over to collections. inish pursuing my degree and/or advance my education, I enroll.
Past Due Accounts: I understand that if I fail to pay the settlement amount, I No transcripts, diplomas, or certification materials will I My past due account may be referred to a collection ag Jeff my account is referred to an outside collection agence bureaus.	be issued to me until my student account is paid in full. gency.
costs, expenses, and fees incurred by the university in su expenses, and fees may include percentage-based fees of percentage-based fees of up to 33.33% of the debt collect addition to the principal, fees, and interest due on my stu	
and financial information about my account to national obligation balance owed. I understand the university and/or collect me regarding my outstanding balance. I authorize and g	norize Tennessee Wesleyan University to release my personal credit bureaus and others concerned with collecting the ion agency acting on behalf of the university may contact give consent for Tennessee Wesleyan University to contact ed with my account. I further authorize collection agencies intact me on all phone numbers and email addresses
Agreement: I hereby acknowledge that I have read and expressly cor	nsent to the above promissory note.
Signature of Student	Date
	 Date