



# EARLY ENTRANCE & HOME SCHOOLED

## APPLICATION AND REGISTRATION FORM

Office Use  
 01 - College  
 01 - Students  
 01 - Classes  
 1 - Wheeling  
 2 - Weirton  
 3 - New Martinsville

### PLEASE COMPLETE FRONT & BACK

Students who are in high school may be admitted to the College as Early Entrance students (1) if they will have completed their sophomore year of high school by the date of enrollment, and (2) if they receive endorsement of their high school principal or his/her designee, and (3) if they receive the consent of their parent or guardian.

**Please print all information clearly.**

SEMESTER:  FALL (Aug-Dec)  SPRING (Jan-May)  SUMMER (May/Aug) YEAR: \_\_\_\_\_

NAME OF HIGH SCHOOL ATTENDING? \_\_\_\_\_

WHAT IS YOUR EXPECTED GRADUATION DATE? \_\_\_\_\_  
Month Year

1. Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

2. Name: \_\_\_\_\_  
Last First Middle

Please list any other name you have used for work or school, including maiden name: \_\_\_\_\_

3. Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. Email: \_\_\_\_\_

5. County: \_\_\_\_\_

6. Day phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Evening phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

7. Gender:  Male  Female

8. Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YY

9. Are you a U.S. citizen?  Yes  No

If no, what is your VISA Type? \_\_\_\_\_

10a. Are you Hispanic or Latino?  Yes  No

10b. If not, check all that apply:

- American Indian or Alaskan Native
- Asian
- Black/African American
- Native Hawaiian/other Pacific Island
- White
- Unknown

11. Which campus will you be attending?

- Wheeling  Weirton  New Martinsville

12. Have you completed ACT or SAT?  Yes  No

If you have not taken the ACT or SAT or achieved satisfactory scores on the above test, you must take West Virginia Northern's placement tests and achieve appropriate scores for enrollment.

CRN	Course Title	Credits	Cost
		Total	

PAYMENT ENCLOSED: CHECK \$\_\_\_\_\_ (Please make payable to WVNCC.)

CREDIT CARD - CIRCLE ONE: MASTER CARD, VISA, DISCOVER, AMERICAN EXPRESS

PRINT NAME ON CREDIT CARD: \_\_\_\_\_ NUMBER: \_\_\_\_\_

CVC CODE (ON BACK OF CARD): \_\_\_\_\_ BILLING ZIP: \_\_\_\_\_

SIGNATURE OF CARD HOLDER: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

**PART A - STUDENT CONSENT:**

1. College credit is based upon successful completion of this course.
2. This course may serve as a substitution for high school courses and may meet high school graduation requirements.
3. A "D" grade may not be acceptable as "successful completion" in college programs or as transfer credit.
4. As a college student, I have responsibility for monitoring my academic progress and for consulting with my high school counselor, college counselor and instructor if problems arise which could affect successful completion of the course.
5. It is the responsibility of the student to make written arrangements with West Virginia Northern Community College's Registrar's Office for a copy of the student's transcript to be sent for the transfer of earned credit to other colleges.
6. Early Entrance students are considered non-degree students and are not eligible for Financial Aid.

I understand and agree to the above requirements for this course(s). In addition, I authorize West Virginia Northern Community College to release information about attendance records, academic progress and official final grades to designated high school personnel.

I certify that all the information provided in this application is complete and correct to the best of my knowledge. I understand that any false information or omission of information is cause for suspension from West Virginia Northern Community College. I will acquaint myself with and abide by the student code of conduct, including compliance with the Drug-Free Schools and Communities Act and other requirements governing the academic and social standards of West Virginia Northern Community College.

Signature of Student: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**PART B - PARENT/GUARDIAN CONSENT:**

I consent to my child taking a college course. I understand that this course(s) is part of my son's/daughter's permanent college record. I accept financial responsibility for payment of tuition. I also understand that the College cannot release information to me about my son/daughter without a signed release of confidentiality form on file. The College has my permission to create a student E-mail account for my child.

Signature of Parent/Guardian: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Tuition is due at time of registration unless otherwise noted. Contact the campus counselor with any questions.

**PART C - PRINCIPAL OR DESIGNEE CONSENT:**

I endorse the above named student to enroll in Early Entrance Courses.

Signature of principal or designee: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

<p>Weirton Campus 150 Park Avenue Weirton, WV 26062-3797 304-723-2210</p>	<p>New Martinsville Campus 141 Main Street New Martinsville, WV 26155-1211 304-455-4684  www.wvncc.edu info@wvncc.edu</p>	<p>Wheeling Campus 1704 Market Street Wheeling, WV 26003-3643 304-233-5900</p>
---	---	--