



WSCC Dual 2 Degree Early College Course Approval Form

Student Name: _____
(First) (Middle) (Last)

A Number: _____ DOB: _____

High School: _____ Grade: _____ GPA: _____

Student Phone: _____ Student Email: _____

Semester: Fall Spring Summer

Course Name & Number	CRN	Location	Days & Times
<i>Ex. ENG 101 - English Composition I</i>	<i>20154</i>	<i>WSCC Hanceville</i>	<i>MW 8:00 AM-9:15 AM</i>

Counselor Signature: _____

Date: _____

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Phone: _____

Parent/Guardian Email: _____

Registration Deadlines by Semester	
Summer/Fall Priority	April 15
Summer Final	May 15
Fall Final	August 1
Spring Priority	October 15
Spring Final	December 1

Dual 2 Degree Contact Information: