



Office Use Only:
BICE
Test Scores
Transcript

JOHN A. LOGAN COLLEGE
 700 Logan College Drive
 Carterville, IL 62918
 Phone: 618-985-2828 Fax: 618-985-4433

DUAL ENROLLMENT REGISTRATION FORM

NAME: _____ **S.S. or JALC STUDENT ID #:** _____
Last First M.I.

ADDRESS: _____ **PHONE #:** _____
Street Address

_____ **E-MAIL:** _____
City State Zip Code

BIRTH DATE: _____ **GENDER:** **Male** **Female** **YEAR OF HIGH SCHOOL GRADUATION:** _____

GRADE LEVEL: **Sophomore** **Junior** **Senior**

HIGH SCHOOL: Carbondale Du Quoin Johnston City Trico
 Carterville Elverado Marion West Frankfort
 Crab Orchard Herrin Murphysboro Other _____

Course Enrollment

SEMESTER and YEAR: _____ FALL _____ SPRING _____ SUMMER									
ADD DROP	COURSE PREFIX	COURSE #	SECTION #	CREDIT HOURS	ADD DROP	COURSE PREFIX	COURSE #	SECTION #	CREDIT HOURS

Please read and initial the following statements:

- _____ I understand that I am responsible for paying all tuition in excess of 8 credit hours and all fee charges by the posted due date.
- _____ I understand that I must contact the Dual Credit Office or my guidance counselor to make any schedule changes.
- _____ I understand that I am subject to all privileges and policies in the Dual Credit Student Handbook.
- _____ I understand that grades for my dual credit courses are recorded permanently on my John A. Logan transcript and that performance in dual credit courses may have implications on future financial aid eligibility. See the Dual Credit Student Handbook on the JALC website for additional information.
- _____ Some courses may have content that is graphic, violent, or mature in nature; however, this content is directly related to the course curriculum. Please discuss any questions or concerns about exposure to sensitive material with the course instructor.
- _____ I waive the right to privacy and grant John A. Logan College officials permission to share information regarding my performance with my parents, legal guardians and/or high school personnel.

Student Signature **DATE**

H.S. Principal or Counselor Signature **DATE**

DC/DE Director Signature **DATE**

Dual Credit and Dual Enrollment Courses, continued

Time eligibility chart for qualified students entering the Dual Credit/Dual Enrollment Program:

	Entering the program fall of sophomore year	8 consecutive semester eligibility
	Entering the program spring of sophomore year	7 consecutive semester eligibility
	Entering the program the summer before junior year	6 consecutive semester eligibility
	Entering the program fall of junior year	5 consecutive semester eligibility
	Entering the program spring of junior year	4 consecutive semester eligibility
	Entering the program summer before senior year	3 consecutive semester eligibility
	Entering the program fall of senior year	2 consecutive semester eligibility
	Entering the program spring of senior year	1 semester eligibility

This chart is informational and may be modified if the Illinois Community College Board changes enrollment status requirements for additional student groups.

_____ Student Initial