

INSTRUCTIONS

Rising high school seniors may apply for Dual Enrollment Admission to UNC Asheville for the purpose of taking courses not offered by their high school. Applications are reviewed on a case-by-case basis. Course enrollment at UNC Asheville is determined by availability of space in the classes selected. There is no application fee. Applications for Dual Enrollment are valid for one semester only. You must submit a new application for each additional semester that you wish to take UNC Asheville courses. **All tuition and fees associated with enrollment are due at the time of registration.**

ELIGIBILITY FOR DUAL ENROLLMENT

To be eligible for dual enrollment at UNC Asheville you must:

1. Meet the Minimum Course Requirements of The University of North Carolina, except senior English and fourth year of Math.
2. Meet the following standards:
 - Minimum GPA of 3.60.
 - SAT Reasoning Test minimum score of 1150 on Math and Critical Reading or ACT with Writing Test minimum composite score of 25.

Applications will be reviewed on a rolling basis and applicants must complete the following:

1. Completed and signed UNC Asheville Dual Enrollment Application; which includes a signed permission from your high school principal and/or designated school official with approved course selections (page 2).
2. Official SAT Reasoning Test or ACT with Writing Test scores.
3. Official high school transcript.

Please submit these application materials together. Application packets can be submitted to:

UNC Asheville Office of Admissions
1 University Heights, CPO #1320
Asheville, NC 28804

For more information or if you have questions, call the Office of Admissions, 828/251-6481 or 800/531-9842.
www.unca.edu/admissions

OFFICE OF ADMISSIONS ■ Application for Dual Enrollment

Please complete this application in black or blue ink and return to: Office of Admissions, CPO #1320, UNC Asheville, One University Heights, Asheville, NC 28804-8502.

FULL LEGAL NAME (No initials or abbreviations)

ALL legal names you have used previously _____

Social Security number _____ - _____ - _____ Voluntary, used for university record keeping.)

Current mailing address

_____ - _____ Valid until _____

Street/P.O. Box City State Zip (9-digit) (month/day/year)

Home phone _____/_____ Other phone _____/_____ E-mail _____

Permanent address

_____ - _____ Valid until _____

Street/P.O. Box City State Zip (9-digit) (month/day/year)

Home phone _____/_____ Other phone _____/_____ E-mail _____

RESIDENCY STATUS

North Carolina Law (General Statute 116-143.1) states that in order to determine eligibility for the in-state tuition rate, "Every applicant for admission shall be required to make a statement as to length of residence." The following information should allow for an accurate determination of residency status. We will contact you if we need additional information. If the total time listed is less than 12 months, please explain on the back under Additional Information.

I certify that I am a bonafide resident of _____ in _____ County _____ State

I have been a resident from _____ to _____

Begin date End date

Citizenship: United States International student, country of citizenship: _____

Resident alien: Green Card number _____ Issue date _____ Expiration date _____

Non-resident alien: Type of visa _____

PERSONAL DATA

Date of birth _____ City and state of birth _____ Sex: Male Female

Racial/ethnic identification (used for federal reporting purposes only)

African American/Black American Indian/Alaskan Native Asian/Pacific Islander Hispanic

Caucasian/White Other (specify) _____

Are you now, or have you ever been, a member of any branch of the U.S. Armed Forces? Yes No

FAMILY DATA

Father (or guardian)

Address _____

Street / P.O. Box City County State Zip (9-digit)

Home phone _____/_____ Business phone _____/_____ State of legal residence _____

Initial date of residence in North Carolina (month/year) _____

Occupation _____ Employer _____

Highest level of education (colleges & degrees earned) _____

Mother (or guardian)

| | | | | |
|--|-------|------------------------------|--------------|--------------------------------|
| Last | First | Middle | Jr./III/etc. | Preferred Name/Nickname |
| Address _____ | | | | |
| Street / P.O. box | City | County | State | Zip (9-digit) |
| Home phone _____ / _____ | | Business phone _____ / _____ | | State of legal residence _____ |
| Initial date of residence in North Carolina (month/year) _____ | | | | |
| Occupation _____ | | Employer _____ | | |
| Highest level of education (colleges & degrees earned) _____ | | | | |

REQUIRED INFORMATION

Your "yes" answer to one or more of the following questions will not necessarily preclude your being admitted. *However*, your failure to provide complete, accurate and truthful information will be grounds to deny or withdraw your admission, or to dismiss you after enrollment.

For the purpose of the following six questions, "crime" or "criminal charges" refers to any crime other than a traffic-related misdemeanor or an infraction. You must, however, include alcohol or drug offenses whether or not they are traffic related.

1. Have you been convicted of a crime? No Yes
2. Have you entered a plea of guilty, a plea of no contest, a plea of nolo contendere or an Alford plea, or have you received a deferred prosecution or prayer for judgment continued to a criminal charge?
 No Yes
3. Have you otherwise accepted responsibility for the commission of a crime? No Yes
4. Do you have any criminal charges pending against you? No Yes
5. Have you ever been expelled, dismissed, suspended, placed on probation or otherwise subject to any disciplinary sanction by any school, college or university?
 No Yes
6. If you have ever served in the military, did you receive any type of discharge other than an honorable discharge?
 No Yes
 Currently serving Never served

Failure to answer questions 1–6 fully will delay the processing of your application. If you answer "yes" to any of the six questions above, please explain the circumstances on a separate sheet titled Additional Information.

You must promptly notify the Admissions Office in writing of any criminal charge, any disposition of a criminal charge, or any school, college or university disciplinary action against you, or any type of military discharge other than an honorable discharge that occurs at any time after you submit this application. Your failure to do so will be grounds to deny or withdraw your admission, or to dismiss you after enrollment.

HIGH SCHOOL INFORMATION

| | | | |
|---|------|---------------------------------|---------------|
| Current high school _____ | | | |
| Address | City | State | Zip (9-digit) |
| High school College Board code number _____ | | Graduation date _____ | |
| Name of school counselor _____ | | High school phone _____ / _____ | |

List all previous high schools you have ever attended for any length of time, whether or not you have completed a term.

| | |
|------------------|---|
| High School Name | Dates Attended(m/yr-m/yr) High School College Board Code Number |
|------------------|---|

PROPOSED UNC ASHEVILLE CLASS SCHEDULE

To BE COMPLETED BY YOUR HIGH SCHOOL

is a student in good standing at _____

High School and has permission to take the above course(s) for the _____ semester beginning _____, 200____
at UNC Asheville.

NAME *please print* _____ **TITLE** _____
Principal or designated school official

PHONE ____ / _____

SIGNATURE _____ **DATE** _____

APPLICANT'S AFFIRMATION/AGREEMENT

I certify the above to be correct and authorize the secondary schools and/or colleges I have attended to release transcripts, test scores, recommendations and other information required by the University of North Carolina at Asheville. I understand that all credentials submitted in support of this application become the property of the university and are not returnable. I have not omitted any previous high schools or colleges of attendance. I agree to conform to the rules and regulations of the university. Any additions or changes in the information provided on this application must be submitted in writing to the Admissions Office prior to enrollment. I understand that my failure to provide complete, accurate and truthful information on this application will be grounds to deny or withdraw my admission, or dismiss me after enrollment.

APPLICANT'S SIGNATURE _____ **DATE** _____

Application must be signed and dated before we can render an admission decision. An incomplete application will be returned to you for completion, thereby delaying action on your application.

ADDITIONAL INFORMATION

For office use only:

| | | | |
|-----------------|--------------------|-------------------|-------------------|
| Date Received | Ret. Date Received | | |
| Appl. Fee | Date Entered _____ | Res. Status _____ | IS _____ OS _____ |
| date | | | |
| Req. Rule _____ | Class | | |
| Dec. _____ | Adm. Off _____ | Date _____ | Ltr. _____ |
| Dec. | Adm. Off. | Date | Ltr. |

Notations: