



Admissions
2100 16th Ave S
Great Falls, MT 59405

Phone: (406) 771-4300
Fax (406) 771-4329
dual@gfcmsu.edu

DUAL ENROLLMENT CHECKLIST

ELIGIBILITY CHECKLIST - PLEASE CAREFULLY REVIEW AND CHECK EACH BOX BEFORE TURNING IN YOUR PACKET:

- I am (1) at least 16 years of age or a high school junior **AND** (2) enrolled at a high school that has a current dual enrollment agreement with Great Falls College MSU.
- I understand that only college courses numbered 100-level and above are eligible for dual credit. Additionally, priority for on-line and on-campus courses is given to degree seeking Great Falls College MSU students; there is no guarantee that requested courses will be available.
- I understand that if I plan to enroll in **Math, Writing, and/or Science courses**, I need to either:
 - ✓ Attach proof of required placement scores (ACT, SAT, or Accuplacer) **OR**
 - ✓ Make arrangements to take the Accuplacer (*can be scheduled through Great Falls College MSU Testing Center <http://students.gfcmsu.edu/testing/guidelines.html> or (406) 268-3711*).
- All enrollment forms have been carefully reviewed and signed by:
 - ✓ Me (the student) **AND**
 - ✓ My Parent/Guardian **AND**
 - ✓ My High School Counselor.

ONCE YOU'RE ACCEPTED AND ENROLLED IN CLASSES AT GFC MSU:

1. **You will receive** an official **Welcome Letter** notifying you of your acceptance to Great Falls College MSU, providing you with your Student ID and dual enrollment class schedule, and directing you to the next steps.
2. **You will receive** an email notification from Great Falls College MSU eLearning Department explaining how to use your online account and our on-line learning platform (D2L/Brightspace).
3. **You may receive** a bill in the mail from Great Falls College MSU Student Accounts Office:
 - Students enrolling in dual enrollment courses are eligible for two free courses (up to six credits) through the **1-2-FREE Program** (Implemented Fall 2018).
 - Any additional dual enrollment courses are billed at 50% of regular tuition costs. Dual enrollment students are exempt from all mandatory fees but may be assessed course/program fees.
 - If a bill is assessed for dual enrollment courses, students will receive it by mail. Payment of all dual enrollment costs is required at the start of term. Dual enrollment students are responsible for complying with applicable campus payment policies, procedures, and methods.

OTHER IMPORTANT INFORMATION

Release of Information

The Dual Credit Program is a joint program between Great Falls College MSU and your high school. As a joint program, the college and your high school have determined that it is administratively necessary for enrollment, attendance, and grades earned in college courses be shared with your high school. No academic information from Great Falls College MSU will be released to your parents/guardians unless you expressly consent to such disclosure via the **Release of Information** section on the Registration Form. Additionally, for high school students taking college-credit only courses, the college will not release information to your parents/guardians unless you expressly consent to such disclosure via the **Release of Information** section on the Registration Form.

Disability Services

Great Falls College MSU can provide accommodations for students with documented disabilities. If you require accommodations, please submit a written request to Disability Services. More information can be found at <http://students.gfcmsu.edu/disabilityservices/>

Policies, Procedures & Deadlines

Dual credit students are subject to the college's official timelines, catalog, policies, and procedures. It is important to note the procedure for add-ing, dropping, or withdrawing classes. Find out more information at <http://admissions.gfcmsu.edu/dualenrollment/>



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Dual Enrollment Student Application for Admission

(You must submit this application if this is the first time you are applying for dual enrollment **OR** you are not currently enrolled in dual credit classes. Admission using this application does NOT constitute permanent or regular admission to the college.)

Applying for which term: Fall Spring Summer Year: _____

Personal Information—REQUIRED

Full Legal Name: _____
Last First Middle

Date of Birth: ____/____/____ Social Security Number: _____
*Provision of the SSN is voluntary & used to distinguish individuals of the same or similar names

Mailing Address: _____ City: _____ State: _____ Zip: _____

Permanent Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____ Cell: _____

Country of Citizenship: _____ If not U.S., are you a permanent resident alien of the U.S.? Yes No

Name of High School or Home School: _____ Expected Graduation Year: _____

Voluntary Statistical Information

Montana institutions of higher education using this application do not discriminate in admission or the provision of services nor employment policies on the basis of race, gender, national origin, marital status, creed, religion, color, age or physical or mental handicap. Providing the following information requested by this section is voluntary and the information provided is for statistical analysis only

Gender:

- Male
- Female

Indicate all races that apply:

- American Indian or Alaskan Native *(primal tribal affiliation and reservation)*
- Asian *(country of origin)*
- Black or African American
- Hawaiian or Pacific Islander
- White

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino

*If other, please specify: _____

Safety & Security Questions—REQUIRED

An affirmative response to any of these questions will not automatically prevent admission, but you will be asked to provide additional information. This information will be reviewed by a campus committee to ensure campus safety. Any falsification or omission of data may result in a denial of admission or dismissal.

Have you ever been convicted of a felony? *(Please include instances of deferred sentencing)* Yes No

Have you ever been subjected to court-ordered confinement for threatening or causing physical or emotional injury to persons or property? Yes No

Have you ever been disciplined, suspended from, or placed on probation at any education institution for non-academic reasons? Yes No

Have you ever been required to register as a sexual or violent offender? Yes No

I hereby certify that to the best of my knowledge the foregoing information is true and complete without evasion or misrepresentation. I understand that if it is later found otherwise, it is sufficient cause for rejection or dismissal. If my application for admission is approved, I agree to abide by the present and future rules and regulations, both academic and nonacademic, and the scholastic standards of the appropriate institution, its colleges, schools, departments and institutes, including but not limited to those rules, regulations and standards stated in the catalog. I further acknowledge that if I fail to adhere to these regulations or meet these requirements, my registration may be canceled.

Applicant's complete legal signature: _____

Notice of Nondiscrimination: It is the policy of the Office of the Commissioner of Higher Education that there will be no discrimination or harassment on the grounds of race, color, sex, marital status, religion, national origin, age, sexual orientation, or disability in any educational programs, activities, or employment. Persons having questions about equal opportunity and nondiscrimination should contact the Office of the Commissioner of Higher Education MOA Coordinator at kbrooke@montana.edu



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Dual Enrollment Student Registration Form

(This form must be submitted each semester of intended enrollment. If you **did not enroll** in dual credit classes in the previous semester, you must also submit the Application for Admission in addition to this form.)

Applying for which term: Fall Spring Summer Year: _____

➔ Personal Information REQUIRED

Full Legal Name: _____
Last First Middle

Student ID#: _____ Date of Birth: _____

*You will have a Student ID if you have previously been enrolled at Great Falls College MSU

Mailing Address: _____ City: _____ State: _____ Zip: _____

Permanent Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____ Cell: _____

Name of High School or Home School: _____ Expected Graduation Year: _____

Name of high school guidance counselor: _____

➔ Release of Information REQUIRED

The college and your high school have determined that it is administratively necessary for enrollment, attendance, and grades earned in college courses be shared with your high school. No academic information from Great Falls College MSU will be released to your parents/guardians unless you consent to such disclosure below.

I hereby authorize Great Falls College MSU to discuss and/or release the following information to my parent(s)/guardian(s) as designated below: **Please check the appropriate boxes below.**

- | | | |
|--|-------------------------------------|---|
| <input type="checkbox"/> Grades | <input type="checkbox"/> Attendance | <input type="checkbox"/> Conduct |
| <input type="checkbox"/> Bills | <input type="checkbox"/> Enrollment | <input type="checkbox"/> Health or Safety Information |
| <input type="checkbox"/> Additional Information: _____ | | |

Name of designated parent(s)/guardian(s): _____

Student signature _____ **Date of Authorization:** _____

**student's consent expires at end of 1 year from date of student signature*

➔ Cost & Billing Information REQUIRED

Party responsible for payment: _____ Relationship to Student: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Designation of a responsible party indicates consent for the college to discuss the bill with the party designated.

Course Selection REQUIRED

*Please use our online **Class Scheduling** tool at https://prodmyinfo.montana.edu/pls/gfagent/bzskcrse.PW_SelSchClass to search for classes and locate course information. Students must satisfy all course prerequisites and provide placement test scores when required. Registration cannot be processed unless documented scores are attached or on file at Great Falls College MSU. All students using this registration form will follow the college's official timelines, catalog, policies, and procedures.

ON CAMPUS AND/OR ONLINE COURSES (Taught through GFC MSU)

1 ST 8-Week Block						
Course	Course Title	CRN Course Reference Number	Instructor	Credits	Dual Credit (DC) OR College Credit (CC)	
Ex: CSCI 105-180	Computer Fluency	12345	Robinett	3	DC	CC
					DC	CC
					DC	CC
					DC	CC
2 nd 8-Week Block						
Course	Course Title	CRN Course Reference Number	Instructor	Credits	Dual Credit (DC) OR College Credit (CC)	
					DC	CC
					DC	CC
					DC	CC
Full Semester						
Course	Course Title	CRN Course Reference Number	Instructor	Credits	Dual Credit (DC) OR College Credit (CC)	
					DC	CC
					DC	CC
					DC	CC

CONCURRENT COURSES (Taught in High Schools)

Course	Course Title	CRN Course Reference Number	Instructor	Credits	Dual Credit (DC)
					Dual Credit
					Dual Credit
					Dual Credit

Approval REQUIRED

Student Name (Print): _____

Student Signature: _____

**Required*

Date: _____

Parent/Guardian Signature: _____

**Required*

Date: _____

High School Counselor or Principal Signature: _____

Date: _____

**The High School official signature certifies that the student meets the requirements for dual credit or College-only credit, is enrolled at a Montana high school accredited by the Board of Public Education and has verification of all required immunizations on file at the high school.*

College Counselor or Advisor Signature: _____

Date: _____

**The College official signature certifies that the student meets the requirements for dual enrollment and is enrolled in the appropriate college courses.*



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Dual Enrollment Student Application for Hardship Scholarship

Eligibility for the Hardship Scholarship is determined by completion of this form, including all signatures and dates. Verification of financial need is determined by Method 1 or Method 2 listed below and accompanying documentation (if applicable).

Office Use Only:

Term: _____

Initials: _____

Students enrolling in dual enrollment courses through Great Falls College Montana State University are eligible for two free courses (up to six credits) through the **1-2-FREE Program**. After a student has utilized the free courses, they may be eligible to receive a scholarship to cover any tuition that exceeds what is covered through the **1-2-FREE Program**. If the student is determined eligible, they may enroll in additional dual enrollment courses free of charge (course, program fees and textbook costs may apply).

Students must reapply *each semester* for the scholarship. If a student meets the criteria, the scholarship will automatically be applied to their student account at Great Falls College MSU.

Student Information—REQUIRED

Full Legal Name: _____
Last First Middle

Date of Birth: ____/____/____ Student ID#: _____ Enrollment Term: _____

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

**Students under 18 years require a parent/guardian signature. Emancipated minors do not require a parent/guardian signature.*

Scholarship Eligibility Verification—REQUIRED

Please select which verification method you choose and complete the appropriate section

VERIFICATION METHOD 1 (by the High School)

I verify this student is eligible for free and reduced lunch and/or is a McKinney/Vento participant and is therefore eligible for the scholarship.

Printed Name of High School Official: _____

Title: _____

High School Official Signature: _____

Date: _____

VERIFICATION METHOD 2 (by the student)

I verify I and/or my primary household is participating in one of the programs listed below and therefore eligible for the scholarship.

Check **any/all** boxes that apply **AND provide documentation**

- I receive free or reduced school lunch.
- My household participates in SNAP/WIC.
- I am a McKinney-Vento participant.
- My household receives a Section 8 housing voucher.
- My household participates in TANF.
- A household member receives SSI.
- My household participates in Head Start.
- A household member participates in Medicaid and/or Healthy Montana kids.