



Dual Enrollment

Application

Spring Semester 2024

Today's Date _____

Student's Information

Student's First Name _____ Student's Last Name _____

Student's Home Address _____
Street City State Zip Code

Student's Phone Number _____ Student's email _____

Parent's Information

Parent's First Name _____ Parent's Last Name _____

Parent's Home Address _____
Street City State Zip Code

Parent's Phone Number _____ Parent's email _____

Academic Information

Student's High School _____

Student's High School Counselor _____

Full-time student Part-time student Current Grade Level _____ Current GPA _____

Have you successfully completed/or taking **Unique Skills-College Readiness**? Yes No

Are you currently receiving special education accommodations? Please list:

Course Offering

In spring 2024:

COE 1100 Learning Essentials and Self Discovery (3-credit course)

High School Counselor Certification

To be completed by your High School Counselor:

Has _____ demonstrated readiness for college coursework as determined by an educational records review and/or demonstrated through scores on a common placement test?

Yes No

Is _____ in good conduct standing at _____ High School ?

Yes No

Counselor's Name _____ Signature _____

Date _____

Certification

I hereby certify that the information above is correct

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

Application Instructions

Complete the information on page one of the application.

Ask your High School Counselor to complete the top of page two.

Sign and Date the certification(Student and Parent)

Please submit the following with your application:

- Documentation of a diagnosed LD, ADHD or other neurodevelopmental disability
- High School Transcript

Please send this application and supporting documents to:

Office of Admissions
Beacon College
105 East Main Street
Leesburg FL 34748