

University of Michigan-Flint

Application for Dual Enrollment

Last Name (Legal)		First Name (Legal)		Suffix		Middle	Middle (Full)	
Previous last name(s), if any		Birth date	Birth date (mm/dd/yy)		Social Security Number		Gender	
							O Female	O Male
Current Mailing Address (Number and Street)			City		State		Zip Code	
Permanent Mailing Address (if different)			City			State	Zip Code	
Mobile Phone	Home Phone		Eı	mail Address		ــــــــــــــــــــــــــــــــــــــ		
Citizenship						Native Langu	age	
OU.S. Citizen OPermanent Resident/Green	Card O Noncitizen	Country						
Race/Ethnicity: Information is collected for st It is not used in the admission								
Please indicate whether you consider yourself ONO, not Hispanic or Latino OYes, Hispa		no.						
In addition, select one or more of the followin OAmerican Indian or Alaska Native OAsi	g racial categories to d			an or Other Pacific I	dander () White		
Parent Email Address	un Obligation of Facility			rent Mobile Phone	ALL CONTRACTOR OF THE PARTY OF	J 174.12		
	<u></u>		<u></u>					
DUAL ENROLLMENT OP	TIONS							
The University of Michigan-Flint offers four path	ways through which st	udents may pu	rsue college level c	oursework while con	npleting hi	gh school:		
Dual Enrollment Educational Partnership; programs are created in collaboration with a num A complete list of DEEP programs and schools ca	ber of partnering scho	ol systems. Stu	rt-style dual enroll idents must be enr	lment programs that olled at one of these	range from partnering	1 6-14 credit hou schools in order	rs over an acade to participate in	mic year, These a DEEP program.
Early College: Early Colleges are an intensive the with their high school counselor to apply for this		rogram that co	ombines the best el	ements of the high s	chool and e	arly university e	xperience. Stude	ents must work
Which of the dual enrollment types are you pursu	ing? ODEEP O	Early College				•		
Dual Enrollment Educational Partnership	s (DEEP):						-	
Which Location?		and the second s						
Which Semesters (check all that apply)? OSep	tember - Fall 2019	OJanuary - W	inter 2020		,			
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Which Program?								
Which Program?								
Wnich Program?						···· t		
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ACADEMIC HISTORY								
ACADEMIC HISTORY List the most recent high school(s) attended. Office			the UM-Flint Adm	alssions Office by you	ır guidance led to			For office use only
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PAYMENT AUTHORIZATION (To be completed by public school officials.)

The school district identified below comm	nits to provide Snancial support nursuant to state regulations in support of dual enrollment	
Name of High School	Payment Authorization Waved	
High School Official Signature	Signed DEEP Agreement With High School	Date
Any balance not covered by the high scho	ool is the student's/parent's responsibility	

IN-STATE TUITION GUIDELINES

Are you a Michigan resident	OYes, since (month/year):	O _{No}	
If you have lived outside the	state of Michigan in the last three years, please list t	ne most recent state (or nation if outside the US) and approxim	ate dates you lived there,
If any of the following circum	istances listed below apply, you are required to file a	n Application for In-State Tultion if you wish to be considered	for in-state tuition assessment.
 You live outside the St 	ate of Michigan for any purpose.		
 You attended or gradu 	ated from a college outside the State of Michigan.		
 You lived or worked o 	utside the State of Michigan at any time within the l	st three years.	
• You are not a U.S. citi	zen.		
· Your spouse partner.	or narent is in Michigan as a nonresident student in	edical resident. follow or for military assignment or other temp	oomry employment

- You are 24 years of age or younger and a parent lives outside the State of Michigan.
- You are 24 years of age or younger and attended or graduated from a high school outside the state of Michigan.
 You attended or graduated from an out-of-state high school and have been involved in educational pursuits for the majority of time since high school graduation.
- · You attended any University of Michigan campus (Ann Arbor, Dearborn, or Flint) as a nonresident.

Questions pertaining to your residency status can be answered by staff in the Residency Classification Office, University of Michigan Office of the Registrar, 1210 LSA Building, 500 South State Street, Ann Arbor, MI 48109-1382, phone (734) 764-1400. To apply for in-state tuition classification visit www.ro.umich.edu/resreg.php.

SUPPORTING MATERIALS

Have you ever been expelled, suspended, or placed on probation by any secondary school or college you attended for academic dishonesty or because of an offense that harmed or had the potential to harm others?	OYes	O _{No}	
Have you ever been convicted of a criminal offense other than a minor traffic violation, or been found to be delinquent by a juvenile court, or are there such charges currently pending against you at this time?	O Yes	O No	
If you answered yes to either of the questions above, you must include a separate, detailed statement of explanatio	.	:	

PERSONAL INFORMATION

By my signature, I certify that the answers I have given to all questions on this application are correct and complete to the best of my knowledge. I understand that falsification or omission of information or credentials may result in revocation of admission. I understand that I am responsible for following the University of Michigan-Flint's registration policies: If I fail to comply with the University's policies, I understand that I will be responsible for any charges that are incurred. Additionally, I understand my signature below authorizes the University of Michigan-Flint to release my academic information including, but not limited to grades, transcripts, entrollment, and attendance records to my current school or third party agencies, school district administrator(s), and intermediate school district (ISD) administrator(s) each term during my attendance as a student.

Student Signature (required) Dat

My son/daughter has my approval to enroll as a dual enrolled student at the University of Michigan-Flint. I understand that I am responsible for payment of charges incurred by my child that are not covered by the school district for all dual enrollment terms.

Parent Signature (required)

Date