Admission Guidelines and Registration Procedures
For Dual Enrollment
High School Juniors and Seniors

Guidelines for Admission:
1. Student must have completed the sophomore year.
2. Student must have a minimum cumulative high school GPA of 3.2 on 4.0 scale.
3. Student must have ACT composite score and all subscores of 19 or higher or comparable SAT scores. If ACT or SAT scores are not available, PLAN scores with composite score and all subscores of 19 or higher.
4. Student’s eligibility to enroll for credit is determined by admission personnel after consultation with high school personnel, who must provide permission for the student to enroll. If needed, consultation with personnel in the ETSU academic department offering the course will be made.
5. Admission to selected courses will be limited on an individual classroom basis according to space availability.
6. Students may register for no more than seven (7) semester hours per semester when enrolled in the program by the last date for late registration.
7. Students interested in the Dual Enrollment Grant of the Tennessee Lottery must file the appropriate application for the grant on-line with TSAC (www.state.tn.us/tsac) and register for courses prior to the TSAC deadline dates.
8. Students who plan to enroll in one Dual Enrollment class at ETSU and one Dual Enrollment class at another institution during the same semester must submit a Consortium Agreement in order to receive Dual Enrollment Grant funding for both classes.
9. Students must receive the Dual Enrollment Grant in order to be considered for the Dual Enrollment Scholarship provided by ETSU.

Registration Procedure:
The following materials must be received before the student can be considered for admission:
1. The attached forms, with proper signatures and proposed class schedule
2. Official high school transcript and any available test scores (ACT or SAT or PLAN)
3. Application for admissions
4. Application fee of $25.00
5. The attached Immunization Health History form with appropriate signature based on your age at the time of application. This form must be submitted and processed before registration for classes.
6. If you have completed dual enrollment courses at another institution you must submit transcripts before you can be considered for the Dual Enrollment Grant or Dual Enrollment Scholarship.
7. Courses must be approved by Admission personnel prior to registration.
8. Additional online/RODP fees apply if enrolled in an online/RODP course. The student is responsible for any additional fees associated with the selected course.
9. The Dual Enrollment Grant can only be used for 1000 and 2000 level courses.
10. Once courses are approved it is the responsibility of the student to register for courses and pay fees.
11. Grades will be assigned for completed courses and appear on an ETSU transcript.
12. Withdrawing from a dual enrollment course could impact future dual enrollment grant eligibility. Please consult with the ETSU Scholarship Office prior to withdrawing from a course for more information.
Permission to Enroll

To be completed by student:

Student’s Name_______________________________________________________________

Address _____________________________________________________________________
________________________________________________________________________________

High School Name_____________________________________________________________

I understand the guidelines concerning my admission and the registration regulations. I understand I must complete
the application on-line at www.state.tn.us/tsac to be considered for the Dual Enrollment Grant and ETSU Dual
Enrollment Scholarship or I will be responsible for all tuition and fees due. I provide consent for information
regarding my admission and records to be discussed with my parent and/or guardian while enrolled as a dual
enrollment student. I understand that receiving more than $1,200 in Dual Enrollment Grant funding in high school
will result in a (dollar for dollar) reduction in my Hope Scholarship during my first semester of enrollment at the
postsecondary level. I understand I will be subject to the university’s regular established policies for registration and
grading.

__________________________________   _____________________________
Student Signature                                         Date

To be completed by principal or guidance counselor:

The above student meets the established admission guidelines and has my permission and
recommendation to enroll at East Tennessee State University.

This student has a current grade point average of __________.

__________________________________   _____________________________
Principal or Guidance Counselor                 Date

To be completed by parent:

My son or daughter has my permission to enroll at East Tennessee State University as a special student. I understand
the guidelines concerning his/her admission and the regulations regarding registration for classes. I understand that
receiving more than $1,200 in Dual Enrollment Grant funding in high school will result in a (dollar for dollar)
reduction in my son or daughter’s Hope Scholarship during my first semester of enrollment at the postsecondary
level. I understand that my son/daughter is subject to the university’s regular established policies for registration and
grading.

__________________________________   _____________________________
Parent Signature                Date
## Proposed Class Schedule

| Student’s Name _____________________________________________________________ |
| (Last)                                       (First)                             (Middle) |

Check One:  [ ] FALL  [ ] SPRING  [ ] SUMMER

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<th>CRN #</th>
<th>Subject/Course/Section</th>
<th>Day</th>
<th>Time Start</th>
<th>Time End</th>
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1. CRN # - The CRN number (example 13877) is a five-digit number used to speed entry of your registration request by the terminal operator.
2. The Subject/Course/Section (example, Acct-2010-001) consists of three parts.
3. Day codes – Day Symbols may be used alone or in combination (example, TR = Tuesday and Thursday)
   - M – Monday
   - T – Tuesday
   - W – Wednesday
   - R- Thursday
   - F- Friday
Authorization to Release Grades

I authorize East Tennessee State University to release my transcript of academic work to my high school, after attending East Tennessee State University as a Dual Enrolled or Early Admission student. I understand this permission form only applies while attending East Tennessee State University under the status of Dual Enrollment or Early Admission.

__________________________________________  _____________________________
Student’s Legal Name (Please Print)                            ETSU ID Number

__________________________________________  _____________________________
Student’s Signature                  Date

Please complete the following:

Name of High School: ______________________________________________

High School Address: ______________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________

ETSU Office of Admissions
PO Box 70731
Johnson City, TN 37614
423-439-4213/1-800-462-3878
Email go2etsu@etsu.edu
Steps for Dual Enrollment Students

First Time Dual Enrollment Students

1. Submit all of these forms to the Office of Undergraduate Admissions at least two weeks before the first day of class.

   • Application for Admission (includes a $25 application fee)
     o Official High School Transcript (must be in a sealed envelope)

   • Admission Guidelines and Registration Procedures for High School Juniors and Seniors (3 pages)
     o Page 1 – Permission form (must be signed by parent AND school official)
     o Page 2 – Proposed class schedule
     o Page 3 – Transcript release form
     o Page 4 – Health clinic form

   • College/University Transcript
     o If you have completed dual enrollment courses at another college/university you must submit transcripts.

   • Tennessee Dual Enrollment Grant Application (available on line at www.collegepaystn.com) - You must maintain a cumulative college gpa of 2.75 to remain eligible for the Dual Enrollment Grant
     o Must be submitted every term
     o Only available for 1000 and 2000 level courses
     o If you are planning to take one dual enrollment class at ETSU and one dual enrollment class at another school during the same semester, you must submit a consortium agreement in order to receive Dual Enrollment Grant funding for both classes

   • Fee Discount Form for dependents of state employees, TBR/UT system employees, or Tennessee public school teachers

2. Register for classes. (You may not be able to register for Math or English classes on Goldlink because of special registration requirements. You may need to register in person.)

3. After all grants, discounts and scholarships have been applied to your account, pay your fees. You must pay your fees or confirm your registration before the first day of class.
Steps for Returning Dual Enrollment Students

Returning Dual Enrollment Students
1. Submit all of these forms to the Office of Undergraduate Admissions at least two weeks before the first day of class.

- Admission Guidelines and Registration Procedures for High School Juniors and Seniors (3 pages)
  - Must be submitted every semester
  - Page 1 – Permission Form must be signed by parent AND school official
  - Page 2 – Proposed class schedule
  - Page 3 – Transcript release form
  - Page 4 – Health Clinic Form – NOT required for returning students

- College/University Transcript
  - If you have completed dual enrollment courses at another college/university you must submit transcripts.

- Tennessee Dual Enrollment Grant Application (available on line at www.collegepaystn.com) - You must maintain a cumulative college GPA of 2.75 to remain eligible for the Dual Enrollment Grant
  - Must be submitted every term
  - Only available for 1000 and 2000 level courses

- Fee Discount Form for dependents of state employees, TBR/UT system employees, or Tennessee public school teachers
  - Must be submitted every term

2. Register for classes. (You may not be able to register for Math or English classes on Goldlink because of special registration requirements. You may need to register in person.)

3. After all grants, discounts and scholarships have been applied to your account, pay your fees. You must pay your fees or confirm your registration before the first day of class.
Meningococcal Meningitis and Hepatitis B
Immunization Health History Form

The General Assembly of the State of Tennessee mandates that each public or private postsecondary institution in the state provide information concerning hepatitis B infection to all students entering the institution for the first time. Those students who will be living in on-campus housing for the first time must also be informed about the risk of meningococcal meningitis infection. Tennessee law requires that such students complete and sign a waiver form provided by the institution that includes detailed information about the diseases. The required information below includes the risk factors and dangers of each disease as well as information on the availability and effectiveness of the respective vaccines for persons who are at-risk for the diseases. The information concerning these diseases is from the Centers for Disease Control and the American College Health Association.

The law does not require that students receive vaccination for enrollment. Furthermore, the institution is not required by law to provide vaccination and/or reimbursement for the vaccine.

A. Hepatitis B (HBV)
Hepatitis B (HBV) is a serious viral infection of the liver that can lead to chronic liver disease, cirrhosis, liver cancer, liver failure, and even death. The disease is transmitted by blood and or body fluids and many people will have no symptoms when they develop the disease. The primary risk factors for Hepatitis B are sexual activity and injecting drug use. This disease is completely preventable. Hepatitis B vaccine is available to all age groups to prevent Hepatitis B viral infection. A series of three (3) doses of vaccine are required for optimal protection. Missed doses may still be sought to complete the series if only one or two have been acquired. The HBV vaccine has a record of safety and is believed to confer lifelong immunity in most cases.

_____ I hereby certify that I have read this information and I have received the initial dose of the Hepatitis B vaccine. Date of initial dose of the Hepatitis B vaccination series: ______/_____/_____

_____ I hereby certify that I have read this information and I have elected not to receive the Hepatitis B vaccine.

Signature of Student or Parent/Guardian (If student is under18): __________________________ Date: __________

B. Meningococcal Meningitis
Meningococcal disease is a rare but potentially fatal bacterial infection, expressed as either meningitis (infection of the membranes surrounding the brain and spinal cord) or meningococcemia (bacteria in the blood). Meningococcal disease strikes about 3,000 Americans each year and is responsible for about 300 deaths annually. The disease is spread by airborne transmission, primarily by coughing. The disease can onset very quickly and without warning. Rapid intervention and treatment is required to avoid serious illness and or death. There are 5 different subtypes (called serogroups) of the bacterium that causes Meningococcal Meningitis. The current vaccine does not stimulate protective antibodies to Serogroups B, but it does protect against the most common strains of the disease, including serogroups A, C, Y and W-135. The duration of protection is approximately three to five years. The vaccine is very safe and adverse reactions are mild and infrequent, consisting primarily of redness and pain at the site of injection lasting up to two days. The Advisory Committee on Immunization Practices (ACIP) of the U.S. Centers for Disease Control and Prevention (CDC) recommends that college freshmen (particularly those who live in dormitories or residence halls) be informed about meningococcal disease and the benefits of vaccination and those students who wish to reduce their risk for meningococcal disease be immunized. Other undergraduate students who wish to reduce their risk for meningococcal disease may also choose to be vaccinated.

_____ I hereby certify that I have read the information and I have received the vaccine for Meningococcal Meningitis. Date of Meningococcal Meningitis vaccine: ______/_____/_____

_____ I hereby certify that I have read this information and I have elected not to receive the vaccine for Meningococcal Meningitis.

Signature of Student or Parent/Guardian (If student is under18): __________________________ Date: __________

For more information about Meningococcal Meningitis and Hepatitis B disease and vaccine, please contact your local health care provider or consult the Center for Disease Control and Prevention Web site at www.cdc.gov/health.

Revised May 22, 2012