

Dual Credit Admissions Packet for North Garland High School



Complete the **ONLINE Dual Credit Admissions Application** here:

www1.dcccd.edu/stuapp

Application for Admission Results page

- ✓ Upon submission of the online application, you will immediately receive a pop up message with your Richland College Student ID number; **or** your message may say, Pending or Possible Duplicate Record
- ✓ Please print a copy of the Admission Results page to submit with other application forms
- ✓ Email your Dual Credit advisor with your Name, High School, Birthdate and App Nbr for the Pending or Duplicate Record message (email addresses are at the bottom of page)

High School Student Enrollment Form

- ✓ Choose dual credit course selections with your NGHS Counselor
- ✓ Signed by Student, Parent, & North Garland High School Counselor

Consent to Emergency Treatment Form

- ✓ Signed by parent if student is under the age of 18
- ✓ Signed by student if student is the age of 18 or over

FERPA Release/Registration by Proxy Form

- ✓ Form **must** be completed to release information to parent(s) regarding the admissions and registration process

Official High School Transcript

- ✓ Request an official high school transcript from your NGHS Counselor or Registrar

College Placement Scores or Complete Pre-Assessment Activity

- ✓ Submit copies of qualifying test scores for TSI Exemption: SAT, ACT, or STAAR EOC Level II
- ✓ If you are not TSI exempt, complete the Steps for the Pre-Assessment Activity (included)

Bacterial Meningitis Vaccination

- ✓ Proof of vaccination is **due no later than 10 days before the 1st day of class** for all courses taken on any DCCCD campus. **(Only for Gov. and Eco. taken at Richland during the summer).**
- ✓ Some exemptions from the State of Texas Immunization requirement may apply.

DEADLINES FOR DUAL CREDIT

Turning in completed application to Richland College – Check with your high school counselor for deadlines Taking the TSI Assessment or submitting other scores – No less than two weeks before classes begin

Students must meet the Dual Credit eligibility requirements as outlined by the Texas Higher Education Coordinating Board and the DCCCD Dual Credit guidelines to participate in the Dual Credit program. If a student needs to take the TSI assessment, they can do so at a DCCCD Testing Center **after** the completed application packet and Pre-Assessment Activity has been verified by the Dual Credit Advisor.

TSI testing will be given at NGHS on November 7 and 8 2016 and April 25 and 26 2018. Paperwork for each testing date is due a week before the test. (October 30 and April 13)

Please refer all questions to:

Catherine Meyers

Office phone: 972.238.6116 Office phone: 972.761.6823 Email: cmeyers@dcccd.edu (preferred method)

Dual Credit Application, eConnect and PreAssessment Help Sheet

1. Go to <https://www1.dcccd.edu/stuapp/>
2. Click on the link *Admissions Application for High School Students*
3. Fill in your information
 - a. First, Middle & Last name
 - b. Home, Work & Cell number
 - c. E-mail address & confirm e-mail (This should be the student's email address. Do not use a parent's email.)
 - d. Please choose one of the following: *I currently live in Texas*
 - e. Please indicate on what basis you are seeking admissions: *Dual Credit/Concurrent*
 - f. Create a username
 - g. Create a password & confirmed password
 - h. Click on *Create Account & Continue*
4. Page I – Part A
 - a. What semester will you begin taking classes: *choose current semester*
 - b. Reason for attending university: *two year degree*
 - c. I plan to take courses primarily through:
 - i. Pick Eastfield College if you attend LCHS, SGHS or RHS
 - ii. Pick Richland College if you attend SHS, NGHS, NFHS, or GHS
 - d. Your social security number: If you have an social security please click on: The following is my social security #: add your social security # OR if you do not have one or do not know it please click on: I do not have a Social Security #
 - e. Date of birth
 - f. Address, City, State & Zip code
 - g. Please choose a county: *Dallas County*
 - h. How long have you lived at this address: Choose the number of years and months
 - i. Permanent Mailing address: Do not fill out, leave it blank
 - j. Place of Birth: *City, State & Country*
 - k. How do you identify yourself: *Ethnicity, Race & Gender*
 - l. What is your primary language: *choose a language*
 - m. Are you a U.S. Citizen: *Yes or No*. If you answered yes, scroll down to Military-Veteran Status. If you said no, fill out the questions below
 - n. Military-Veteran Status: *"None of the above"*
 - o. Emergency Contact: *Name of person in case of an emergency & contact #*
 - p. Did you take Tech Prep Courses: *No*
 - q. Click on: *Save & Continue*
5. Page II – Part A (cont.)
 - a. Which of the following best describes your High School Education: *I am or will be a High School Graduate*
 - b. What year did you or will graduate from High School: *Enter the year of graduation*
 - c. Which best describes your High School or International Equivalent: Click on *Texas high school*. Select from All Texas High Schools & scroll down to *choose your school name*
 - d. Did you take Tech Prep course for college credit: *No*
 - e. Will you graduate from a Texas public High School with the Recommended or Distinguished Achievement Program: *Yes*
 - f. Did or will you graduate with an IB diploma: *No*
 - g. Previous College Work: Click on *I have no previous college experience*
 - h. Scroll down all the way towards the bottom of the page and then click on *I have not taken any of the test listed above and I am not claiming an exemption*
 - i. Please click on *"I have not taken any test"* even though you might have exemptions scores. We have to verify first.
 - j. Click on *Save & Continue*
6. Page III – Part B
 - a. During the 12 months prior to the term for which you are applying, did you attend a public college/university in Texas: *No and skip to Part C.*
7. Part C
 - a. Are you a Texas resident: *Yes*
8. Part D
 - a. Did you live in Texas or will you have lived in Texas the 3 consecutive months leading up to high school graduation or completion of the GED: *Yes*
 - b. When you begin the semester for which you are applying, will you have lived in Texas for the previous 12 consecutive month *Yes*

9. Part E
 - a. Do you file your own federal income tax as an independent taxpayer: *No*
 - b. Are you claimed as a dependent or are you eligible to be claimed as a dependent by parent: *Yes*
 - c. If you answered "No" to both questions above, who provides the majority support: *Parent or Guardian*
 - d. Click on *Save & Continue*
10. Page IV – Part F
 - a. Skip part F
 - b. Click on *Save & Continue*
11. Page V Part H
 - a. Skip part H
 - b. Click on *Save & Continue*
12. Part V Part I
 - a. Click on the box towards the end of the page "*By checking this box, I am attaching my electronic signature*"
 - b. Click on *Save & Continue*
13. Review Application
 - a. Review all the information you typed in or clicked on and make sure everything is correct. Make changes if needed.
 - b. If everything is good then click on *Save & Continue*
14. Submit Application
 - a. Click on "*Submit My Application*"
15. Application for Admission Results
 - a. You will get a Letter of Acceptance. WRITE down or TAKE A PICTURE of your ID number & print out the acceptance letter. It should get a 7-digit # as your Eastfield ID#.
16. Towards the bottom of the acceptance letter click on *Set up My eConnect Account*

e-Connect

1. Towards the bottom of the page of the acceptance letter click on "*Set up My eConnect Account*"
 - a. Enter your Last Name, Birth Date, Email Address, and Student ID Number. Email address must be the same one you enter on the application and ID# is the number given to you when you completed the application.
 - b. Click Submit
2. Create Password
 - c. Create a password & confirmed password. Make sure to
 - d. Password hint: enter a password hint in case you forget your password
 - e. Challenge Question: Choose a question and enter an answer for security
 - f. Case sensitive: Click on the box Enable Enhanced Security
 - g. Click Submit
3. Confirmation
 - h. You should get a confirmation page saying congratulations you have created an account
 - i. Do not log in

Pre-Assessment Activity

1. Go to www.econnect.dccd.edu
2. Click the Current Credit Student Menu
3. Under "*prepare to register*" click on the link "*pre-assessment video*".
4. Video Links: Click on either Eastfield College or Richland College and Watch the video.
5. Once you completed watching the video click on "*continue to assessment*" below the video.
6. You will be prompted to login to your Student eConnect Account
7. Click the box next to the information that indicates "I certify that I have watched the Pre-Assessment Video" and click submit
8. Complete the quiz (Make sure you write down your answers in case the computer times-out and you have to start over)
9. Once you complete the quiz you will get a confirmation list that shows you the correct & incorrect answers
10. Print your results and Click *Log Out* when you are finished

Garland ISD & Dallas County Community College District
DUAL CREDIT ACKNOWLEDGMENT FORM

Student Name: _____

GISD ID#: _____

The Garland Independent School District (GISD) and Dallas County Community College District (DCCCD) partner to offer dual credit courses for all qualifying GISD students. Dual credit classes are college-level courses and great consideration should be taken when selecting appropriate classes. Please initial by each item listed below.

- _____ I understand I must pass the required Texas Success Initiative Assessment by the designated timelines to participate in the program.
- _____ I understand I am limited to only two dual credit classes per semester unless I demonstrate outstanding academic performance. If I am approved to take more than two dual credit courses, I must maintain a DCCCD GPA of 2.5 or higher to continue taking more than two dual credit classes per semester.
- _____ I understand that my grades in dual credit classes are transcribed onto my official high school and college transcripts.
- _____ I understand that if I receive a final semester grade of W, D, or F in any dual credit course, I may not be eligible for dual credit classes the following semester.
- _____ I understand that if I drop a course after the DCCCD add/drop date, I will receive a failing grade in the course. I must submit the required withdrawal form to my assigned DCCCD college's Dual Credit Coordinator by the published DCCCD deadline to receive a W on the college transcript.
- _____ I understand that I must maintain a 2.0 GPA at DCCCD and maintain a completion rate of 70% to be eligible to remain in the dual credit program. Students who withdrawal from dual credit courses or earn grades of D or F on a college transcript may not be eligible for future financial aid or may have limited financial aid options beyond high school.
- _____ I understand that taking excessive dual credit hours (30 extra hours beyond what is required on my undergraduate degree plan) may cause me to lose Federal Financial Aid eligibility and/or cause a tuition price increase at Texas public institutions of higher education.
- _____ I understand it is my responsibility as a DCCCD student to utilize the eConnect and eCampus websites to check my schedules, GPA, grades, advising report, and announcements from the colleges.
- _____ I understand that Academic Dishonesty may result in consequences from both my GISD high school and DCCCD. DCCCD may suspend my dual credit eligibility and any appeals must go through the DCCCD college campus process.
- _____ I will be limited to 15 hours per semester.
- _____ Appeals for DCCCD grades, drop policy, or other DCCCD actions must go through the DCCCD appeals process as stipulated by the assigned DCCCD college campus.
- _____ As a dual credit student, I am both a GISD and DCCCD student, thus I am entitled to all the resources at my assigned DCCCD college campus – college library, student services, free tutoring, etc.

* Student Signature: _____

Date: _____

* Parent/Guardian Signature: _____

Date: _____



GARLAND INDEPENDENT SCHOOL DISTRICT
Registrar's Office

Student Record Release Authorization Form

Student _____ DOB _____ Grade _____ ID# _____
Last First Middle Initial

High School:

Garland High School
310 S. Garland Road
Garland, Texas 75040

Garland Alternative School
2015 S. Country Club Road
Garland, Texas 75041

Garland Evening High School
310 S. Garland Road
Garland, Texas 75040

Lakeview Centennial high School
3503 Hayman Drive
Garland, Texas 75043

Naaman Forest High School
4843 Naaman Forest Blvd.
Garland, Texas 75040

North Garland High School
2109 Buckingham Road
Garland, Texas 75040

Rowlett High School
4700 Kirby Road
Rowlett, Texas 75088

Sachse High School
3901 Miles Road
Sachse, Texas 75048

South Garland High School
600 Colonel Drive
Garland, Texas 75043

Information listed below will be released to the listed person(s)/agencies.

Achievement Test Score*
Attendance Information*
Birth Date*
Grade Point Average/Ranking*
Other _____

Grades*
Graduation Program Type*
Home Address*
SAT/ACT/PSAT Scores*
Other _____

Social Security Number*
Special Education Information
including Psychology Evaluation
TABS/TEAM/TAAS/TAKS Test
Scores
Other _____

*Information automatically included on the transcript

The information listed above may be released on the named student to:

College/ Universities
Military Recruiters
Scholarship Donors
Employer
Student
Parent(s)
GISD Personnel (as appropriate)
Other _____

Do not send information to:

Signature of Parent, Guardian

Date

Signature of Student (18 years or older)

Date

This release is in accordance with the provisions of the Family Educational Rights and Privacy Act of 1974.

Consent to Emergency Treatment

Dallas County Community College District ("DCCCD")

Minor Student Under Age 18

Print Student Name (Last, First, Middle) Date of Birth Program

DCCCD on behalf of Richland or El Centro College is an educational institution in which
Circle your Campus Location
 the student named above is enrolled.

Voluntary Student Health Information		
Allergies to Medicine(s)	Allergies to Food / Other	List Medicines this student takes every day.
1).	1).	1).
2).	2).	2).
3).	3).	3).
List Health Problems or Concerns you believe the College should be aware of in Case of Emergency:		
A.		
B.		
C.		

The College has written authorization to consent to emergency medical treatment from a person having the right to consent as follows:

I, _____, _____
Print Name (Parent / Legal-Guardian) (Relationship to the Student)

grant College permission to authorize emergency medical treatment for the above named student.

Parent / Legal Guardian's Contact Information			
Print Name		Print Name	
Cell #		Cell #	
Work #		Work #	
Home #		Home #	
Pager #		Pager #	
In the event a Parent or Legal Guardian cannot be reached, please contact:			
Emergency Contact #1 (Print Name below)	Relationship to student:	Contact Numbers	
		Work/Home/Cell #:	
Emergency Contact #2 (Print Name below)	Relationship to student:	Work/Home/Cell #:	

The undersigned is responsible for all medical costs associated with this authorization.

_____ _____
Signature of Parent or Legal Guardian Date

This authorization is effective until _____
Date

GISD ID#: _____



Dallas County
Community College District

DCCCD ID# _____

FERPA Release and Registration by Proxy Form for Dual Credit The Family Educational Rights and Privacy Act

Last Name First Name MI DCCCD ID No.

Mailing Address Street No. or P.O. Box City, State & Zip

Phone Email

Dual Credit students enrolled in college classes are protected by the Family Educational Rights and Privacy Act (FERPA) of 1974. In order to comply with federal laws dealing with the confidentiality of official student records (FERPA), the student must sign a written release authorizing registration by a proxy and/or authorizing the release of the student's educational information to the proxy. If the student wishes to be registered by the parent(s) or allow parent(s) to have access to certain educational records this form must be completed, signed and submitted to DCCCD. The student has the ultimate responsibility to make sure the registered courses are correct. The student may cancel the release at any time by submitting another FERPA form. The release is valid until the date of the student's High School Graduation as confirmed on the final official high school transcript or when an updated form is received by DCCCD. **Anticipated High School Graduation Date:** _____ (Month/Year)

AUTHORIZATION TO RELEASE EDUCATION INFORMATION AND/OR REGISTRATION BY PROXY

Admission – Includes application and documents received for admission status, documents pending, and conditions of admission, correction of address and telephone numbers and signing documents on my behalf

Registration – Includes current enrollment, dates of enrollment, enrollment status, residency status, semester attending and mailing address information

Academic Records – Includes grades received, GPA, and academic progress

Registration by Proxy – Includes course selection, obtaining copy of advising report, adding and dropping courses, and paying tuition if necessary

Please Print Clearly (P=Parent, G=Guardian, O=Other)

Release to _____ Relationship (Circle one): P G O Cancel: _____
Name - Proxy #1 (This is your parent or guardian) Date of Cancellation

Release to _____ Relationship (Circle one): P G O Cancel: _____
Name - Proxy #2 Date of Cancellation

I hereby grant DCCCD permission for the release of my educational information selected above and/or permission for the individual(s) designated above to serve as the authorized proxy for the selected services above.

Student's Signature Date Signature of Proxy #1 (Name listed above) Date

Signature of Proxy #2 Date

NOTE: STATE ISSUED IDENTIFICATION CARD WITH PICTURE IS REQUIRED FOR BOTH THE STUDENT AND THE PROXY WITH THIS FORM: Official state driver's license is preferred. Students may submit a high school identification card, but will be required to sign and print legal name on photo copy.

Office Use Only:	Picture ID Verified by:	Date:
------------------	-------------------------	-------

**Brookhaven Cedar Valley Eastfield El Centro Mountain View North Lake Richland
Colleges of the Dallas County Community College District**

HIGH SCHOOL STUDENT ENROLLMENT FORM NG ID # _____

This certifies that _____, DCCCD ID or SSN _____, is or will be enrolled as a student at NORTH GARLAND HIGH SCHOOL and has permission to concurrently enroll with Brookhaven, Cedar Valley, Eastfield, El Centro, Mountain View, North Lake, and/or Richland.

HS Course	College Course Selections	FALL 2018	SPR 2019	SUM I 2019	SUM II 2019	Dual Credit	College Credit Only
English III	ENGL 1301 & ENGL 1302						
English Lit	ENGL 2332 & ENGL 2333						
US History	HIST 1301 & HIST 1302						
US Govt	GOVT 2305						
Spanish	SPAN 1411 & SPAN 1412						
Physics	PHYS 1405 & PHYS 1407						

I understand I will be enrolling in a college credit course(s) at one or more of the colleges and will be receiving a letter grade that will be recorded on my permanent college transcript. A numerical grade will appear on the high school transcript for dual credit courses; conversion of grades is the responsibility of the respective high school. It is the student's responsibility to verify the transferability of courses with the institution of choice.

Eligibility for continued participation in this program requires satisfactory academic performance at the high school; earned grades of A, B or C in all college courses; and parental and school approval for each subsequent semester of enrollment. A student who earns grades of D or F may not be eligible for future dual credit courses or may have restrictions. Also, students are not eligible for state or federal financial aid while enrolled in high school. However, because they are recorded on the college transcript, grades earned for dual credit/concurrent courses can impact a student's future financial aid.

I understand that if I wish to withdraw from my college course(s), it is my responsibility to first discuss this matter with my high school counselor. Also, it is my responsibility to submit the required withdrawal form to the College Dual Credit/Concurrent Enrollment Coordinator or College Registrar by the published deadline.

A non-immigrant visa student is responsible for maintaining his/her own visa status. I understand it is my responsibility to verify my status and my ability to take college courses through dual credit enrollment.

I understand that **I MUST be enrolled as a full-time student at my high school, and I cannot enroll in more than two college courses per semester, district-wide, without special permission. Only one dual credit tuition waiver per approved dual credit course is allowed. Student is responsible for tuition of a repeated course(s), a concurrent course(s) and costs of online dual credit courses offered outside Dallas County.**

I understand that **ACADEMIC FREEDOM** is practiced at all of the colleges of the Dallas County Community College District. Academic Freedom allows faculty and students to pursue whatever inquiry they feel is important and to speak about it in the classroom without fear of censorship. I understand that within a college environment, students may encounter adult language and images, different philosophical viewpoints and belief systems. I understand that appropriate and essential discipline-specific terminology, concepts and principles are utilized as needed in the classroom setting. All high school students are held accountable to policies, rules, and regulations of the colleges of the Dallas County Community College District. For more information see www.dcccd.edu

I authorize the college to release my transcript to the above named high school related to my college enrollment.

Student Signature 	Date	Parent/Guardian Signature 	Date 
Signature of High School Official		Title	Date

Signature of College Official
Date

Listed below are you College Course Names and complete checklist for each course taken, pending approval, in the appropriate semester.

NG Course Name (College Course Name)	Grades Available	DCCCD Course Number	FALL 2018	SPR 2019	SUM I	SUM II
NG # RICHLAND						
10505 Eng 3: Comp 1 & 2 DC/AP	11-12	ENGL 1301/1302				
10505 Eng 4: Comp 1 & 2 DC/AP	12	ENGL 1301/1302				
10506 Eng 4: Lit 1 & 2 DC/AP	12	ENGL 2332/2333				
33319 Physics	11-12	PHYS 1405/1407				
42106 History US DC/AP	11	HIST 1301,1302				
42222 Government DC/AP	12	GOVT 2305				
77448 Spanish III	10-11-12	SPAN 1411				
91829 MST Web Mastering	10-11-12	IMED 1316				
91831 MST Digital Graphics & Animation	10-11-12	ARTV 1303				
91833 MST Ind Media Application	11-12	IMED 2311				
91834 MST Video Tech	10-11-12	ARTV 1351				
8N205 Advertising	10-12	FSHN2307				
8N215 Fashion Mkt	10-12	FSHD1302				
8N315 Mkt Dynamics	11-12	MKT 1311				
8F305 Financial Math	11-12	POFT 1321				
8K735 MST Internetworking I CISCO	10-11-12	ITCC1477				
8K745 MST Internetworking II CISCO	11-12	ITCC1478				
8K715 MST Comp Maintenance	10-11-12	ITSC1425				

**Brookhaven Cedar Valley Eastfield El Centro Mountain View North Lake Richland
Colleges of the Dallas County Community College District**

HIGH SCHOOL STUDENT ENROLLMENT FORM NG ID # _____

This certifies that _____, DCCCD ID or SSN _____,

is or will be enrolled as a student at NORTH GARLAND HIGH SCHOOL and has permission to concurrently enroll with Brookhaven, Cedar Valley, Eastfield, El Centro, Mountain View, North Lake, and/or Richland.

HS Course	College Course Selections	FALL 2018	SPR 2019	SUM I 2019		SUM II 2019	Dual Credit	College Credit Only
8H775	MST PATHO (H) HPRS2201							
8H765	MST MEDICAL TERMS HITT1305							
8H755	MST PHARM HPRS2300							
8H725	MST-HS CLINICAL ROTATION (H) HPRS 2231							
8H305	HST CLINICAL ROTATION HPRS 2231							
80815	MST WORLD HEALTH HPRS1202							
8H735	MST SKILLED NURSING HPRS 1204							
8H405	GEN ED SKILLED NURSING HPRS1204							

I understand I will be enrolling in a college credit course(s) at one or more of the colleges and will be receiving a letter grade that will be recorded on my permanent college transcript. A numerical grade will appear on the high school transcript for dual credit courses; conversion of grades is the responsibility of the respective high school. It is the student's responsibility to verify the transferability of courses with the institution of choice.

Eligibility for continued participation in this program requires satisfactory academic performance at the high school; earned grades of A, B or C in all college courses; and parental and school approval for each subsequent semester of enrollment. A student who earns grades of D or F may not be eligible for future dual credit courses or may have restrictions. Also, students are not eligible for state or federal financial aid while enrolled in high school. However, because they are recorded on the college transcript, grades earned for dual credit/concurrent courses can impact a student's future financial aid.

I understand that if I wish to withdraw from my college course(s), it is my responsibility to first discuss this matter with my high school counselor. Also, it is my responsibility to submit the required withdrawal form to the College Dual Credit/Concurrent Enrollment Coordinator or College Registrar by the published deadline.

A non-immigrant visa student is responsible for maintaining his/her own visa status. I understand it is my responsibility to verify my status and my ability to take college courses through dual credit enrollment.

I understand that I **MUST** be enrolled as a full-time student at my high school, and **I cannot enroll in more than two college courses per semester, district-wide, without special permission. Only one dual credit tuition waiver per approved dual credit course is allowed. Student is responsible for tuition of a repeated course(s), a concurrent course(s) and costs of online dual credit courses offered outside Dallas County.**

I understand that **ACADEMIC FREEDOM** is practiced at all of the colleges of the Dallas County Community College District. Academic Freedom allows faculty and students to pursue whatever inquiry they feel is important and to speak about it in the classroom without fear of censorship. I understand that within a college environment, students may encounter adult language and images, different philosophical viewpoints and belief systems. I understand that appropriate and essential discipline-specific terminology, concepts and principles are utilized as needed in the classroom setting. All high school students are held accountable to policies, rules, and regulations of the colleges of the Dallas County Community College District. For more information see www.dcccd.edu

I authorize the college to release my transcript to the above named high school related to my college enrollment.

_____ Student Signature	_____ Date	_____ Parent/Guardian Signature	_____ Date
<i>Cynde Quinn</i>		<i>Counselor</i>	<i>2018</i>
Signature of High School Official		Title	Date

_____ Signature of College Official	_____ Date	_____ Date
		NGHS & ELC