



TECHNICAL COLLEGE OF THE LOWCOUNTRY

Appendix A: Admissions Checklist for Dual Enrollment Program

Apply

- Complete Application online at: www.tcl.edu/apply for Dual Enrollment

Residency Declaration

- Submit Dual Enrollment Residency Declaration.
Form can be found at <http://www.tcl.edu/ecco-college-credit>.

Dual Enrollment Agreement

- Submit a Dual Enrollment Agreement with all three signatures to your School Counselor.
Form can be found at <http://www.tcl.edu/ecco-college-credit>.

Registration

Once you have submitted your TCL application and submitted your Dual Enrollment Agreement form to your school counselor, your school counselor will confirm registration has been successfully completed.

If you have any further questions, please contact:

Sara Cain, Dual Enrollment Coordinator

843-525-8336 (Beaufort)

843-470-6038 (New River)

Email: scain@tcl.edu / dualenrollment@tcl.edu



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Appendix B:

Dual Enrollment Agreement & FAFSA Waiver

To Be Completed by the Student:

Last Name: _____ First Name: _____ TCL Student ID: _____
High School: _____ Choose One: First Time Dual Enrollment Student Returning Dual Enrollment Student

I authorize to furnish _____ any and all information pertaining to my academic
(Name of High School)

record while I am enrolled in the Technical College of the Lowcountry as a Dual Enrollment student. I hereby release the Technical College of the Lowcountry from any liability or damage that may result from furnishing the information requested. I affirm that I understand and will abide by all other rules and regulations of the enrollment at the Technical College of the Lowcountry. I have reviewed the TCL Academic Policies and Procedures that govern participation in classes at the Technical College of the Lowcountry.

FAFSA Waiver:

I request a waiver of the submission of the Free Application for Federal Student Aid (FAFSA) as it relates to the Lottery Tuition Assistance eligibility requirement for the following reason: I am a high school student enrolled in the Dual Enrollment program. By not submitting the FAFSA, I acknowledge that:

- I will not be eligible to receive other Title IV aid, which includes the Pell Grant, Federal Supplemental Educational Opportunity Grant, Perkins Loan, Stafford Loans, federal work study and the SC Need-based Grant. Also, I will not be able to participate in other loan programs offered by the South Carolina Student Loan Corporation or other state assistance programs that require the submission of the FAFSA. Further, I understand that neither the state of South Carolina nor the institution can be held liable for any amount of federal or state funds that I forego by signing this waiver.
- I do not owe a refund or repayment of a state grant, Pell Grant, or Supplemental Education Opportunity Grant, and I am not in default on a loan under the Federal Perkins Loan, Federal Stafford Loan, William D. Ford Federal Loan, or any state loans. I understand that the institution will verify this.
- (Male Students Only): I have registered with the Selective Service or I have been exempted from this requirement according to federal law. I understand that students who fail to register with the Selective Service (or fail to be exempt from that requirement) are not eligible to receive Lottery Tuition Assistance.
- The provided information is correct and if any of the information is false, I understand participation in the Lottery Tuition Assistance Program will be cancelled and reimbursement of Lottery Tuition Assistance funds will be required. Further, I understand that if I have attempted to obtain, (or have obtained Lottery Tuition Assistance through means of a willfully false statement or failure to reveal any material fact, condition, or circumstance affecting eligibility), I can be subject to the college/university's code of student conduct and applicable civil or criminal penalties.
- In order to receive Lottery Tuition assistance, you must be a U.S. citizen or a permanent resident that meets the definition of an eligible non-citizen. Students that are considered to have "legal presence" under the "Deferred Action for Childhood Arrivals" also known as DACA, do not qualify for Lottery tuition assistance funds.

Student Signature: _____ Date: _____

To Be Completed by the Parent/Guardian:

I hereby grant approval for my dependent _____ to enroll in Technical College of the Lowcountry courses as a Dual Enrollment student while still enrolled in high school. I accept responsibility for personal matters such as transportation, insurance coverage, and financial arrangements. I acknowledge that I understand TCL's refund policies and I will be held responsible for payment of tuition and fees incurred as a result of withdrawal.

Parent Signature: _____ Date: _____

To Be Completed by the High School Guidance Counselor:

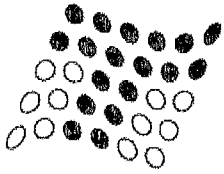
_____ has the approval of our high school to enroll Dual Enrollment courses.

(First Name)

(Last Name)

HS Guidance Counselor Signature: _____ Date: _____

Statement of Non-Discrimination: The Technical College of the Lowcountry is committed to a policy of equal opportunity for all qualified applicants for admissions or employment without regard to race, gender, national origin, age, religion, marital status, veteran status, disability, or political affiliation or belief.



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Appendix C: Student Information Release Authorization
In accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974, the Technical College of the Lowcountry must obtain written consent from a student before releasing any educational or financial information regarding that student to a third party. Such a written request must be signed and dated by the student, specify the type of information to be released, state the purpose of the release, and identify the party to whom the information may be released.

Student Name (Print)

Student ID Number

Information to be Released: (Check all that Apply or Check All the Above. If information to be released is not included in the list below, please indicate under Other)

Financial Aid Information

Enrollment Status

Veteran's Benefits Information

Course Registration Information

Billing Information

Grades/GPA, academic progress, attendance

In School Deferment Information

Transcripts

Placement Test Scores/Testing Information

All the Above

Other: _____

I authorize the Technical College of the Lowcountry to release the indicated information to the person/agency specified below:

Name of Person or Agency

Relation to Student (If Applicable)

Street Address

City

State

Zip

Purpose of the Release of Information: (Please State Reason for Release of Information)

This release will remain in effect until the requestor cancels it in writing at the Registrars' office.

I wish to release the information as described above.

I wish to cancel the above release authorization

Student Signature/Date

Student Signature/Date

The Technical College of the Lowcountry is committed to a policy of equal opportunity for all qualified applicants for admissions or employment without regard to race, gender, national origin, age, religion, marital status, veteran status, disability or political affiliation or belief.

Student Records Office Use Only.

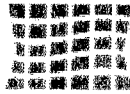
Receipt

Date _____

Staff Signature _____



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Appendix D:

DEPENDENT RESIDENCY FORM

The purpose of this form is to provide residency information that was not completed on the Application for Admission. If your residency classification has been determined as out-of-state due to less than 12 months residency in South Carolina on all documentation or if you are a continuing student, complete the Dependent Residency Reclassification Application or contact the Residency Coordinator at residency@tcl.edu.

Additional information about residency requirements, based on SC Statute 59-112-100, may be found online at www.che.sc.gov.

A "dependent person" is defined as one whose predominant source of income or support is from payments from a parent/spouse/guardian who claims the dependent person on his/her Federal income tax returns. Your residency claim will be based upon that person's information.

STUDENTS HAVE ONE ATTEMPT TO COMPLETE THIS FORM ENTIRELY. INCOMPLETE INFORMATION WILL BE ASSESSED AS OUT-OF-STATE.

STUDENT/APPLICANT INFORMATION

First Name: _____ Last Name: _____ Term applying for: _____

_____ Student ID No: _____ Date

of Birth (mm/dd/yy): _____/_____/_____

Are you licensed to drive? Yes No If no, do you have a State Issued Identification Card?

Yes No State: _____ Issue Date: ____/____/_____

_____/_____/_____ Renewed Transferred from another state First

Issued With whom do you reside? Self Both Parents Father Mother Spouse

Other _____

Who claims you for Federal income tax purposes? Self Both Parents Father Mother Spouse Other

Parents/Guardian Marital Status: Single/Never Married Married Divorced/Separated Widowed Re-Married N/A

If parents are divorced or separated, who is the custodial parent? Father Mother Joint Custody N/A

What is your citizenship status? US Citizen Permanent Resident Other - Specify: _____
(Provide copy of card) (Additional information may be needed)

PARENT(S), SPOUSE, OR LEGAL GUARDIAN INFORMATION

First Name: _____ Last Name: _____ Relationship: _ Does

this person reside in South Carolina? Yes No If yes, date present stay began: ____/____/_____

Does this person reside in Beaufort/Jasper/Hampton/Colleton County? Yes No If yes, date present stay began ____/____/_____

What is his/her address? (Street, City, State, Zip Code): _____

_____ Is this person licensed to drive? Yes No If no, does this person have a State Issued Identification Card? Yes No

State: _____ Issue Date: ____/____/_____ Renewed Transferred from another state First Issued

Does this person have a vehicle registered in his/her name? Yes No

State: _____ Issue Date: ____/____/_____ Renewed Transferred from another state New Purchase

If your parent/spouse/guardian relocated to South Carolina, what was the previous state of residence?

What is this person's employment status? Full-Time Part-Time Unemployed Retired Disabled

Employer Name: _____ Date of Hire: ____/____/____

What is this person's citizenship status? US Citizen Permanent Resident Other – Specify:

(Provide copy of card)

(Additional information may be needed)

APPLICANT CERTIFICATION

I hereby certify that all responses on this application are true and accurate. I understand that any misrepresentation of residency information may result in the payment of non-resident tuition, withdrawal from the college, or other disciplinary action.

Student Signature _____ Date ____/____/____

The Technical College of the Lowcountry is committed to a policy of equal opportunity for all qualified applicants for admissions or employment without regard to race, gender, national origin, age, religion, marital status, veteran status, disability, or political affiliation or belief.

PO Box 1288 Beaufort, SC 29901 • (PH) 843-525-8207 • residency@tcl.edu •
www.tcl.edu/residency