SOUTH SAN HIGH SCHOOL
DUAL CREDIT APPLICATION

STUDENT INFORMATION: (please print)

Name:_____ HS ID: _____ SSN:_____ Grade:_____

Home Address: _____
Street City Zip

Date of Birth: _____ Gender: Male Female

Home Number: _____ Emergency Phone: _____ Student Cell: _____

Email: _____

Ethnic Origin: ___ White (non-hispanic) ___Hispanic/Amer-Span Surname ___Black (non-hispanic)

___American Indian/Alaskan Native ___Asian/Pacific Islander

US Citizenship: Yes No

If no, answer the following:

1. Country of Citizenship_____
2. Permanent Resident Number_____

Parent/Guardian Information:

Name of Parent/Guardian: _____ Relationship:_____

Is parent a US Citizen Yes No

How long has parent/guardian lived in Texas? _____ Is parent/guardian currently working? Y N

Parent/guardian married? Y N How long have parents been married?_____

Student Signature_____ Parent/Guardian Signature:_____

Turn in this form by _____to the Dual Credit Facilitator for _____ 20___ enrollment.

NOTE: This is the first step in the Dual Credit process

South San High School 7535 Barlite Boulevard San Antonio, TX 78224
210-977-7400