



CERRITOS COLLEGE DUAL ENROLLMENT APPLICATION

SECTION I: STUDENT INFORMATION

Semester: ☐ Fall ☐ Spring ☐ Summer Year: _____

Name: _____ Cerritos College Student ID: _____ Date of Birth: _____

Phone Number: _____ E-Mail: _____

Middle/High School (HS) of Attendance: _____

Grade Level: ☐ K-8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th Expected HS Graduation Date: _____

For summer, enter the grade you will enter in the fall (August/September).

I understand that it is solely my responsibility to drop a course once I am enrolled. I further understand that if I do not timely drop a course, I am at risk for having a "W" or a non-passing grade appear on my Cerritos College transcript.

Student Signature: _____ **Date:** _____

SECTION II: PRINCIPAL OR DESIGNEE RECOMMENDATION

I certify that the above named student is academically qualified for the course(s) and would benefit from advanced scholastic or vocational coursework listed below. The student is currently attending accredited private or public school and has district approval to enroll in classes at Cerritos College as long as they do not conflict with the school session. As a reminder it is the school districts responsibility to monitor the 5% cap on any non-GE or non-CTE related courses during the summer.

Course Name (ex. MATH 112): _____ Class Number: _____ Units: _____

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Note: Students are permitted to enroll in up to 11 units for Fall, Spring, & Summer.

Authorized Signature: _____ **Date:** _____

SECTION III: PARENT/GUARDIAN CONSENT

Cerritos Community College District assumes no responsibility for the supervision of minor students outside of the classroom setting. All college coursework is governed by the Family Education Rights and Privacy Act (FERPA), which prohibits release of academic information. I understand that I will not have access to my child's academic records (including, but not limited to grades and transcripts) without his/her written consent, regardless of age. Additionally, course content will not be adjusted for enrolled minors. I recognize that college level courses may not be appropriate for students who are not adults and may contain content that is potentially offensive, graphically violent and/or sexual in nature. I have read and understand the expectations and responsibilities in the Dual Enrollment Application, and I give my approval for my child to enroll in college-level coursework.

Parent/Guardian Signature: _____ **Date:** _____

Cerritos College Office Use Only

☐ CCAP ☐ Non-CCAP ☐ Unit Limit ☐ Equation Variable ☐ SRT/GPT ☐ Student Group

☐ Processed By: _____

Date Form Processed: _____

MINOR CONSENT FOR MEDICAL SERVICES

In California, minors are individuals under 18 years of age. California Family Code 6900 et seq. states that unless a specific exception applies, a minor's parent or legal guardian must consent to medical care. The exceptions include reproductive health services, drug and alcohol abuse treatment, outpatient mental health services and sexual assault-related services.

PLEASE PRINT**Minor Student's Name (printed)** _____**Student I.D.#** _____ **Date of Birth:** _____**Parent/Guardian Address/State/Zip** _____**Phone #:** _____ **Home** **Cell** **Work****Emergency Contact:** _____**Phone #:** _____ **Relationship:** _____**Known health conditions:** _____**Medication or substance allergies:** _____

I hereby authorized Cerritos College Student Health & Counseling Services to provide to my minor dependent any diagnostic test or treatment that is deemed advisable and is to be provided by any medical practitioner of Cerritos College Student Health & Counseling Services or any outside physicians or facilities needed. This authorization is given in advance of any specific diagnosis or treatment that may be required. I further authorize any necessary emergency care if I can't be reached to give direct permission.

Parent/Guardian Name (print)_____
Signature of Parent/Guardian_____
Date

FOR STUDENT HEALTH & COUNSELING SERVICES ONLY**Parent/Guardian telephone consent given:** **YES** **NO** **Date/Time of Consent:** _____**Method of Verification of Identity: (Check all that apply)****Call at workplace: Phone#** _____ **Parent/Guardian Identification:** _____**Gave student's date of birth as:** __________
Staff Signature/Title_____
Date/Time**Cerritos Community College District**11110 Alondra Blvd., Norwalk, CA 90650 | Office (562) 860-2451 | www.cerritos.edu

CERRITOS COLLEGE DUAL ENROLLMENT INFORMATION:

By signing this Dual Enrollment Application, you acknowledge the following:

- A. College-level courses may not be appropriate for students who are not adults and may contain content that is potentially offensive, graphically violent and/or sexual in nature.
- B. Students are subject to the Cerritos College Student Code of Conduct.
- C. This program is designed for K-12 students seeking advanced scholastic courses unless a student is taking classes as part of a College and Career Access Pathways (CCAP) agreement between their school and Cerritos College. Cerritos College defines advanced scholastic as:
 - a. Courses meeting Cerritos College requirements for an Associate in Arts Degree
 - b. Courses that are transferrable to four-year institution (ex. ENGL 100, MATH 140, etc.)
 - c. Vocational courses below 100 level may be taken (ex. COS 50, WELD 52, etc.).
- D. Any course in which a student has enrolled and has not dropped prior to the appropriate deadline will be reflected on the student's Cerritos College transcript.
- E. Approval for dual enrollment college credit to be used for high school credit is determined solely by the student's school district.
- F. Dual Enrollment students do not receive priority enrollment status; with the exception of CCAP students in CCAP courses.
- G. Students will be subject to academic and progress probation as referenced in the college catalogue.
- H. Students must complete a dual enrollment application form each semester.
- I. Students who are interested in taking a PEX course will require Dean approval from Cerritos College. No PEX courses are available to dual enrollment students in the summer.

CERRITOS COLLEGE DUAL ENROLLMENT APPLICATION INSTRUCTIONS:

- 1. Apply to Cerritos College online at www.cerritos.edu/apply**
 - a. Your Cerritos College student number will be emailed to you within 48 hours.
- 2. Download, read and complete the Dual Enrollment Form (page 1):**
 - a. **Student** – Read and sign Section I of the application. Make sure to include the course information.
 - b. **Principal/Designee** – Read the entire application and sign Section II.
 - c. **Parent/Guardian** – Read the entire application and sign Section III.
- 3. Submit the completed Dual Enrollment Application with all signatures to dualenrollment@cerritos.edu**
- 4. Receive an email notification about the status of your application within three business days.**
- 5. Enroll in classes through your MyCerritos student portal.**
- 6. Pay your student fees online through your MyCerritos student portal (Non-CCAP Students only).**

Special Instructions for Dual Enrollment in the Summer:

Summer enrollment for non-CCAP students is restricted to 5% of grade level enrollment at the student's high school. Contact your high school to determine your enrollment for summer sessions.