Dual Enrollment Registration Form

Email:	**Semester:** **(Please indicate fall, spring, or summer and year)**
Student Name (Last, First, MI)	**High School:**

CRN	Subject	Course Number	Section Number	Days	Time	Bldg./Room	Instructor

ALTERNATE COURSE SELECTIONS *

*Please provide an alternate selection in case course(s) requests are closed.

CRN	Subject	Course Number	Section Number	Days	Time	Bldg./Room	Instructor

If you have not done so already, make sure you submit your dual enrollment application. We cannot process your registration without the application.

DEADLINE DATES:

Summer-May 21, 2025
Fall-August 11, 2025

We must receive the completed application and paperwork by the deadline date.

Scan the QR code to go to the dual enrollment application.

1. Selecting courses does not guarantee registration. After we register you, an email will be sent to the email address you used to create your admissions profile with directions on how to check your schedule through MyIUP.
2. All new students must complete a Dual Enrollment Orientation.
3. Please note that any student who wishes to register for a math, English, or upper-level foreign language course must complete online placement testing and will not be registered until the placement test has been completed. The test scores must be reviewed to determine eligibility.
4. By signing this registration form you authorize IUP to report your mid-term grades to your High School (including home school).

The signature acknowledges and approves the courses selected.

If the student is under 18 years of age, please provide a parent or guardian signature below.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

School Counselor Signature _____ Date _____

Current CGPA_____ School Counselor Initials_____