

Application

Dual Enrollment/Dual Credit Approval Form

UAH Admissions Office 301 Sparkman Drive, SSB 106 Huntsville, AL 35899 256.824.2773 // 1.800.824.2255

dual.enrollment@uah.edu

Transcript

Student's Full Name	Email	
High School	Grade Level	
has an overall B av	erage, the appropriate ACT/SAT score	, and has met all other enrollment
criteria for the Dual Enrollment program		
Principal Signature	Counselor Signature	Parent or Guardian Signature
Printed Name	Printed Name	Printed Name
Approved Courses	Course CRN Number	Term
Example: MA 201-04	91108	Fall 2020
An approval form must be submitted for high school for enrollment. Dual enrollment The tuition and fees for each course mus	ent students may not enroll for develop	omental or physical education courses.
RELEASE OF ACADEMIC RECOR	D	
I authorize UAH to release my academic parent or legal guardian, if I am less than notice to the Records office to discontinu	18 years of age. This release shall rem	ain in effect until I provide written
Date	Student Signature	
Date	Parent or Guardian Signature	
	FOR OFFICE USE ONLY	
Received Date	Classes	s Registered Y N

Test Scores