



# Dual Enrollment Registration Form

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


**You must select different course prefixes for both your primary and secondary selections. A course prefix can only be used once. For ex. PSYC 101.**

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

## SECONDARY COURSE SELECTIONS \*

**\*Please provide an alternate selection in case course(s) requests are closed. You must select different course prefixes for your course selection.**

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

<p>If you have not done so already, make sure you submit your dual enrollment application. We cannot process your registration without the application.</p>		<p><b>The spring deadline for submitting both the application and paperwork is January 7, 2026.</b></p>	<ul style="list-style-type: none"><li>• Selecting courses does not guarantee registration.</li><li>• You will receive an email asking for you to log in and accept your admission offer. Please log in and complete this step as soon as you receive the email from us.</li><li>• All new students must complete a Dual Enrollment Orientation.</li><li>• Please note that any student who wishes to register for a math or an 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.</li><li>• By signing this registration form you authorize IUP to report your mid-term grades to your High School (including home school).</li></ul>
<p>Scan the QR code to go to the dual enrollment application at the bottom of the page under How to Apply.</p>			

## What is the student's current grade level?

Please circle the appropriate grade.

Sophomore

Junior

Senior

**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 \_\_\_\_\_