



OFFICE OF ADMISSIONS

Dual Enrollment Fall 2019

TO: Office of Admissions - Indiana University of Pennsylvania
Phone: 724-357-2230/FAX: 724-357-6281

FROM: _____

HIGH SCHOOL: _____

DATE: _____

PHONE NUMBER: _____

NAME OF STUDENT: _____

**This form must be submitted by the high school counselor on behalf of the student applying.
Please check the appropriate boxes below so that all required paperwork is submitted for the dual
enrollment student listed above.**

Forms required for new students:

- Dual Enrollment New Student Application (pages 2-4)
- Signed Dual Enrollment Program Registration Form (page 9)
- Signed Authorization for Release of Mid-term Grades (page 10)
- Signed Dual Enrollment Transcript Request Form (page 11)
- Copy of Official High School Transcript
- Supporting Letter from Guidance Counselor
- Supporting Letter from Mathematics, Science or Technology teacher
(students applying to College of Natural Science and Mathematics [CNSM] STEM Academy ONLY)

Forms required for returning students:

- Dual Enrollment Returning Student Application (pages 5-7)
- Signed Dual Enrollment Program Registration Form (page 9)
- Signed Authorization for Release of Mid-term Grades (page 10)
- Signed Dual Enrollment Transcript Request Form (page 11)
- Supporting Letter from Mathematics, Science or Technology teacher
(students applying for the first time to College of Natural Science and Mathematics {CNSM} STEM Academy ONLY)



Dual Enrollment Application

New Student – Fall 2019

OFFICE OF ADMISSIONS

I wish to attend the IUP campus at: Indiana _____ Northpointe _____ Punxsutawney _____
Please select Indiana campus for online courses

OPTIONAL: I wish to apply to the CNSM STEM Academy in one of the following tracks:

_____ Cyber Security and Information Technology _____ Engineering and Environmental Science _____ Health Professions

(CNSM STEM Academy applicants must select on-campus classes or contact the Dean at dean-cnsm@iup.edu for permission to enroll in online courses.)

PERSONAL INFORMATION

Name _____

Anticipated High School Graduation Date: _____

Social Security Number _____

Banner ID# (if known) _____

Permanent Home Address

County _____ Date of Birth _____

Home Telephone Number _____ Cell Phone Number _____

Email address **(This is a required field.)** _____

Parent Name _____

Parent Email _____

Please check one:

U.S. Citizen _____ Permanent Resident _____ Green Card Number _____ Other (specify visa type) _____

Have you ever been convicted of a felony? No _____ Yes _____ If yes, please attach a separate statement describing the circumstances.

Continued on next page

Are you the son or daughter of an IUP employee? No ____ Yes ____

If yes, please indicate employee name: _____

Are you the son or daughter of an employee of another PASSHE university? No ____ Yes ____

If yes, please indicate employee name: _____

OPTIONAL INFORMATION

Gender: Male Female

What is your ethnicity? Hispanic or Latino Not Hispanic or Latino

What is your race? (Circle one or more races to indicate how you identify.)

White Black or African American Asian

American Indian or Alaskan Native Native Hawaiian or Pacific Islander

ORIENTATION INFORMATION

Orientation/Testing Dates (circle one): **Wednesday, June 26** **OR** **Friday, August 9**

Attendance at Dual Enrollment Orientation is required for all new students. Parent attendance is optional. **Students interested in registering for math or English courses will be required to complete placement testing during this orientation program before registration can be completed.**

JEANNE CLERY ACT

Indiana University of Pennsylvania is committed to assisting all members of the community in providing their own safety and security. The Annual Security and Fire Safety Report contains three years of campus crime and fire statistics, certain campus security and fire policy statements, as well as statistics for public areas immediately adjacent to campus as required by the Jeanne Clery Act. The Annual Security and Fire Safety Report for all of the Indiana University of PA campuses can be found at www.iup.edu/police/about/security/ To obtain a printed copy of the Annual Security and Fire Safety Report, please contact: IUP Department of Public Safety, 850 Maple Street Indiana Pa 15705; telephone 724-357-2141.

The Federal Privacy Act of 1974 requires that you be notified that disclosure of your Social Security number is voluntary and is not required to determine admission. Your Social Security number will be used to match your application with your SAT/ACT test scores and/or financial aid information, so failure to provide it may affect eligibility for financial aid and may delay decision of admission. Your Social Security number is also used to report your educational expenses to the Internal Revenue Service to verify any education-related deductions you may claim on your federal income taxes.

Continued on next page

CONSENT FOR THE COLLECTION AND PROCESSING OF SENSITIVE OR PERSONAL DATA
FROM THE EUROPEAN UNION FOR ADMISSION AND ENROLLMENT PURPOSES

- 1) Pursuant to the European Union General Data Protection Regulation (EU GDPR), the Pennsylvania State System of Higher Education and its member universities, including Indiana University of Pennsylvania (“University”), in its capacity as a data controller under the EU GDPR, must obtain explicit, affirmative consent before it can collect or process any sensitive or personal data for a lawful basis including for admission and enrollment purposes.
- 2) Sensitive data includes data revealing racial or ethnic origin; political opinions; religious or philosophical beliefs; trade union membership; genetic or biometric data; health data; or data concerning a person’s sex life or sexual orientation.
- 3) Any sensitive or personal data that is collected will be for the sole purpose of application for admission to the University that is sent from the EU and is necessary for that purpose or for any purpose permitting the use of sensitive or personal data under applicable law or to meet other compliance obligations of the University.
- 4) I understand that any sensitive or personal data that is collected will also be used to report serious illness, injury, or other health or emergency situations involving me, as well as to address or report discrimination, harassment, sexual or gender-based misconduct and criminal behavior which may be committed by or against me or otherwise involve me, on or off campus, to appropriate authorities including staff, faculty, and administrators of the University or appropriate legal or governmental authorities under applicable policies of the Pennsylvania State System of Higher Education or the University (including but not limited to applicable codes of conduct) and applicable laws (including but not limited to Title IX and the Clery Act).
- 5) I understand that refusal to consent to the use of sensitive or personal data, and the transfer of sensitive or personal data overseas, for the purpose outlined in this notice may make it impossible for the University to carry out necessary activities, and may preclude the University’s ability to provide requested services.
- 6) I understand I have the right to withdraw consent to the collection and processing of sensitive or personal data and to do so, I must contact [insert information for responsible person]. I also understand that the complete deletion of data will not be feasible in all situations to ensure the University’s ability to comply with regulatory requirements.

SIGNATURE (REQUIRED)

By my signature I attest to the fact that all information given on this application is complete and correct. Any omission, falsification, or misrepresentation on the part of the applicant is cause for denial, cancellation of admission, or dismissal from IUP if subsequently discovered. All documents submitted in support of the application become the property of IUP.

Signature _____ Date _____

If you are under the age of 18 years of age, please have the parent or guardian sign below.

Parent or Guardian Signature _____ Date _____



OFFICE OF ADMISSIONS

Dual Enrollment Application Returning Student – Fall 2019

I wish to attend the IUP campus at: Indiana _____ Northpointe _____ Punxsutawney _____
Please select Indiana campus for online courses

OPTIONAL: I wish to apply to the CNSM STEM Academy in one of the following tracks:

_____ Cyber Security and _____ Engineering and _____ Health Professions
Information Technology Environmental Science

Name _____

Anticipated High School Graduation Date: _____

Banner ID# (if known) OR Date of Birth: _____

If you have had a change in address, phone number, and/or email address since the last time you completed an IUP Dual Enrollment application, please provide your updated information below:

Address _____

Home Phone _____ Cell Phone _____

Email _____

Have you ever been convicted of a felony? No _____ Yes _____ If yes, please attach a separate statement describing the circumstances.

Are you the son or daughter of an IUP employee? No ___ Yes ___

If yes, please indicate employee name: _____

Are you the son or daughter of an employee of another PASSHE university? No ___ Yes ___

If yes, please indicate employee name: _____

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- 2) Sensitive data includes data revealing racial or ethnic origin; political opinions; religious or philosophical beliefs; trade union membership; genetic or biometric data; health data; or data concerning a person's sex life or sexual orientation.
- 3) Any sensitive or personal data that is collected will be for the sole purpose of application for admission to the University that is sent from the EU and is necessary for that purpose or for any purpose permitting the use of sensitive or personal data under applicable law or to meet other compliance obligations of the University.
- 4) I understand that any sensitive or personal data that is collected will also be used to report serious illness, injury, or other health or emergency situations involving me, as well as to address or report discrimination, harassment, sexual or gender-based misconduct and criminal behavior which may be committed by or against me or otherwise involve me, on or off campus, to appropriate authorities including staff, faculty, and administrators of the University or appropriate legal or governmental authorities under applicable policies of the Pennsylvania State System of Higher Education or the University (including but not limited to applicable codes of conduct) and applicable laws (including but not limited to Title IX and the Clery Act).
- 5) I understand that refusal to consent to the use of sensitive or personal data, and the transfer of sensitive or personal data overseas, for the purpose outlined in this notice may make it impossible for the University to carry out necessary activities, and may preclude the University's ability to provide requested services.
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Parent or Guardian Signature _____ Date _____

How to Access University-Wide Class Schedule

Registration for Fall 2019 will begin Tuesday, April 2.

Please visit www.iup.edu/myiup

- On the right hand side of the page below the clock, click on “University-Wide Class Schedule”
- Select a term from the dropdown box:
Fall 2019
- If you know what course you would like to register for, select the course subject from the dropdown and enter the course number before hitting the “search” button. (Dual enrollment students should be registering for 100 level courses.)
- If you do not have a specific course in mind, click on “Advanced Search.”
 - Select “Undergraduate” in the “Level” menu.
 - Using the Advanced Search feature, select the campus you would like to attend under “Campus” or select “Online” under “Class Location (Building or Online)” to view online course options.
 - To find liberal studies courses, you may use the “Attribute” dropdown menu. For example, if you select “Meets LS-Social Science,” all the classes displayed will satisfy a social science liberal studies requirement. (You can select multiple items from the “Attribute” dropdown menu.)
 - Additionally, if you are hoping to select a course that takes place on certain days and/or at certain times, you may utilize the “Meeting Days,” “Start Time,” and “End Time” search functions as well. Please note that if you select a start time, but not an end time, all classes that start after that start time will be displayed.
- Please note that CNSM STEM Academy students must select on-campus classes or contact the Dean at dean-cnsm@iup.edu for permission to enroll in online courses.
- **IMPORTANT:** Please be sure to click on the course title to view the course description, as well as a list of any *prerequisites* that are required before you can enroll in that course.
- When completing the registration form, please include **all** of the following information:
CRN (5 digit number), Title Subject, Days, Course Number, Time, Section Number, Building, Course Instructor
- If you have any questions, please call 724-357-2230.



OFFICE OF ADMISSIONS

**Indiana University of Pennsylvania
Authorization for Release of Mid-term Grades
Fall 2019**

I authorize IUP to forward mid-term grades of "D" or below to my guidance counselor during my participation in the Dual Enrollment Program. Grades of "C" or higher are not required to be reported at mid-term.

Student Name (Please print)

Student Signature

Date



Return to:
Indiana University of Pennsylvania

**DUAL ENROLLMENT
Fall 2019**

Office of the Registrar
Clark Hall: 1090 South Drive
Indiana, Pennsylvania 15705

TRANSCRIPT REQUEST FORM

- The Registrar reserves the right to refuse requests for an excessive number of transcripts or to charge a reasonable fee.
- All transcripts are mailed **FIRST CLASS MAIL** including Same Day transcripts. The Registrar's Office is not responsible for incomplete or incorrect addresses and fax numbers.
- Transcripts for students enrolled prior to Fall 1993 may take longer to process and same day service cannot be guaranteed.

STUDENT INFORMATION

Banner ID: @ _____ OR Social Security Number: _____ - _____ - _____

Last Name: _____ First: _____ MI _____ Date of Birth ____/____/____

Former Names (s): _____ Former Names (s): _____

Current Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Telephone Number Required: (____) _____ - _____

Not Enrolled – enter the last semester and year at IUP: _____ For a confirmation email, please provide your email address: _____. Currently enrolled students – a confirmation email will be sent directly to you.

TRANSCRIPT ORDER INFORMATION

- Send transcript *immediately*.
- Hold transcript for *end of current term grade processing* Fall 2019 (identify term or summer session)
- Hold transcript for *recent degree* _____ (identify month and year of degree)

Number of copies: One (1) If separate, signed sealed envelopes are **REQUIRED**, please check here.

When do you need your transcript?

The deadline is 2 PM EST for Same Day/Fax Service.

<input checked="" type="checkbox"/> 2-4 Days Processing – Free Mail/pick up Allow additional time for standard mail delivery. Pick up transcripts will be available by 3 PM.	<input type="checkbox"/> Next Business Day – Free official paper transcript. Order through MyIUP. Go to www.iup.edu/registrar for details. This service is not available if you attended or graduated prior to fall 2000.	<input type="checkbox"/> SAME DAY – Cash/Check Only Mail/pick up - \$10 copy Allow additional time for standard mail delivery. Pick up transcripts will be available by 3 PM.	<input type="checkbox"/> SAME DAY – Cash/Check Only Fax - \$10/copy Domestic faxing only FAX# (____) ____ - ____ ATTN: _____
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NEED TO PAY BY CREDIT CARD? To protect your financial information, transcripts must be ordered and paid for online. Same Day Mail, Pick up, and Fax Service available. Go to www.iup.edu/registrar for details.

I will pick up my transcripts in Clark Hall **OR** Please mail to: GUIDANCE COUNSELOR NAME/ADDRESS

Name of Recipient _____

Address _____

City _____ State _____ Zip _____



Student's Handwritten Signature _____ Date _____

Federal law requires that the student sign and date this request.

Office use only: Cash received: \$ _____ Check received: \$ _____ Initials _____