

# DUAL ENROLLMENT APPLICATION

## Spring 2022

TO: Enrollment Management - Indiana University of Pennsylvania  
Phone: 724-357-2789 Fax: 724-357-3957

**Email your completed application to [kaohara@iup.edu](mailto:kaohara@iup.edu) or fax 724-357-3957**

FROM: \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

DATE: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

NAME OF STUDENT: \_\_\_\_\_

**THIS APPLICATION MUST BE SUBMITTED BY THE HIGH SCHOOL COUNSELOR  
ON BEHALF OF THE APPLICANT. PLEASE CHECK THE APPROPRIATE BOXES BELOW TO  
ENSURE ALL REQUIRED PAPERWORK IS SUBMITTED. PLEASE FAX APPLICATION AND  
SUPPORTING DOCUMENTS TO 724-357-3957**

### REQUIRED FORMS FOR FIRST-TIME APPLICANTS:

- \_\_\_ Application for first-time applicants (pages 2-4)
- \_\_\_ Signed dual enrollment program registration form (page 8)
- \_\_\_ Signed authorization for release of mid-term grades (page 9)
- \_\_\_ Signed transcript request form (page 10). **Select "Please Mail to:"** and list your School Counselor as the recipient. Be sure to include your **School Counselor's name and complete address.**
- \_\_\_ Copy of official high school transcript
- \_\_\_ Supporting letter from high school counselor
- \_\_\_ Supporting letter from mathematics, science, or technology teacher (only required for students applying to STEM Academy)

### REQUIRED FORMS FOR RETURNING DUAL ENROLLED STUDENTS:

- \_\_\_ Application for returning applicants (pages 5-6)
- \_\_\_ Signed dual enrollment program registration form (page 8)
- \_\_\_ Signed authorization for release of mid-term grades (page 9)
- \_\_\_ Signed transcript request form (page 10). **Select "Please Mail to:"** and list your School Counselor as the recipient. Be sure to include your **School Counselor's name and complete address.**
- \_\_\_ Supporting letter from mathematics, science, or technology teacher (only required for students applying to STEM Academy)

# DUAL ENROLLMENT APPLICATION SPRING 2022 FIRST-TIME APPLICANT

I WISH TO ATTEND THE IUP CAMPUS AT: Indiana \_\_\_\_ Northpointe \_\_\_\_ Punxsutawney \_\_\_\_  
(For online courses, please select Indiana campus.)

DO YOU WISH TO APPLY TO THE STEM ACADEMY? YES \_\_\_\_ NO \_\_\_\_

For more information, please visit: <https://www.iup.edu/natsciandmath/events/stem-academy.html>

## **PERSONAL INFORMATION**

Name: \_\_\_\_\_

Anticipated High School Graduation Date: \_\_\_\_\_

Social Security Number (optional): \_\_\_\_\_

Banner ID Number (if known): @ \_\_\_\_\_

Please check one:

US Citizen \_\_\_\_ Permanent Resident \_\_\_\_ Green Card Number \_\_\_\_ Other (specify visa type) \_\_\_\_

Permanent Home Address:

\_\_\_\_\_  
\_\_\_\_\_

County: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Student email address/**must** be a personal email address (Gmail, yahoo, etc.) and **not** a school email

**(required):** \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Are you the son or daughter of an IUP employee?

No \_\_\_\_ Yes \_\_\_\_ If yes, please indicate employee's name: \_\_\_\_\_

**Continued on next page**

**This information is intended for statistical purposes only and will not be used as a factor in determining your admission to the university.**

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

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

What is your race? (Mark one or more races to indicate what you consider yourself to be.)

White \_\_\_\_\_ Black or African American \_\_\_\_\_ Asian \_\_\_\_\_

American Indian/Alaskan Native \_\_\_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_\_\_

### **ORIENTATION INFORMATION**

Orientation/Testing Date:

**Friday, December 10, 2021 at 3:30 PM or Tuesday, January 11, 2022 at 3:30 PM**

Orientation will be conducted virtually. A zoom meeting link will be sent to the student via email prior to the orientation date.

Attendance at orientation is required for all first-time, dual enrolled students. Parent attendance at orientation is optional.

Students interested in registering for math or English courses will be required to complete placement testing before or during orientation before registration can be completed.

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/](http://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.

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.

**Continued on next page**

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)**

I understand that any misrepresentation of facts on this application will be cause for refusal or cancellation of my application to Indiana University of Pennsylvania.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

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

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# DUAL ENROLLMENT APPLICATION SPRING 2022 RETURNING STUDENT

I WISH TO ATTEND THE IUP CAMPUS AT: Indiana \_\_\_\_ Northpointe \_\_\_\_ Punxsutawney \_\_\_\_

(For online courses, please select Indiana campus.)

ARE YOU A STEM ACADEMY STUDENT? YES \_\_\_\_ NO \_\_\_\_

IF YES, HAVE YOU SPOKEN WITH THE STEM ACADEMY CONTACT REGARDING YOUR COURSE SELECTIONS? YES \_\_\_\_ NO \_\_\_\_

IF NO, DO YOU WISH TO APPLY TO THE STEM ACADEMY? YES \_\_\_\_ NO \_\_\_\_

For more information, please visit: <https://www.iup.edu/natsciandmath/events/stem-academy.html/>

Name: \_\_\_\_\_

Anticipated High School Graduation Date: \_\_\_\_\_

Banner ID Number: \_\_\_\_\_ OR Date of Birth: \_\_\_\_\_

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

Permanent Home Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Are you the son or daughter of an IUP employee?

No \_\_\_\_ Yes \_\_\_\_ If yes, please indicate employee's name: \_\_\_\_\_

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/](http://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.

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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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**SIGNATURE (REQUIRED)**

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Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# How to Access University-Wide Class Schedule

**The Spring 2022 schedule of courses is now available to view online.**

**Registration for Spring 2022 will begin on Monday, October 11, 2021.**

- Please visit [www.iup.edu/myiup](http://www.iup.edu/myiup)
- On the right side of the page, below the clock, click on "University-Wide Class Schedule."
- Select the term from the dropdown box: (ex. **Spring 2022**)
- 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 enrolled 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.) Please visit this page for more information about IUP's liberal studies requirements: <https://www.iup.edu/liberal/categories/>
  - 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 may be displayed.
- **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 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 724-357-2789 or email [kaohara@iup.edu](mailto:kaohara@iup.edu) for assistance.

# IUP Dual Enrollment Program Registration Form

Banner ID (if known)	Semester Spring 2022
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) requested is closed.

**Schedule Approval**

Signature acknowledges and approves the courses selected.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Counselor

\_\_\_\_\_  
Date

**Selecting courses does not guarantee registration. After admission, you will receive confirmation of your registration via email.**

**All new students must attend Dual Enrollment Orientation. Please note that any student who wishes to register for a math or English course must complete placement testing and will not be registered until the placement test has been completed and the test scores have been reviewed to determine eligibility.**



# **Indiana University of Pennsylvania Authorization for Release of Mid-term Grades Spring 2022**

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

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Student Name (Please print)

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Student Signature

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Date



Return to:  
Indiana University of Pennsylvania

Phone: (724) 357-2217  
Fax: (724) 357-4858  
Email: registrars-office@iup.edu

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

## TRANSCRIPT REQUEST FORM

### STUDENT INFORMATION

Banner ID @ \_\_\_\_\_ Date of Birth \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Former Name(s) \_\_\_\_\_ Former Name(s) \_\_\_\_\_

Current Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Daytime Telephone Number Required ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

For a confirmation email, please provide your e-mail address \_\_\_\_\_

### TRANSCRIPT ORDER INFORMATION

*Transcripts will be sent after semester grade processing.*

Number of copies \_\_\_\_\_ If separate, signed sealed envelopes are REQUIRED, please check here

I will pick up my transcripts in Clark Hall **OR**  Please mail to:

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: Name: \_\_\_\_\_ Process Date: \_\_\_\_\_