NWACC EARLY COLLEGE EXPERIENCE
NORTHWEST ARKANSAS COMMUNITY COLLEGE

Online

APPLICATION AND REGISTRATION FORM

NWACC USE ONLY
Student ID # _____
Term _____
Processed By _____ Date _____
Scanned By _____ Date _____

High school students who wish to enrol in Online classes through Early College Experience (ECE) at NWACC must complete this form. A schedule of ECE Online courses will be available each semester at participating high schools. **ENROLLMENT DATES: April 1- July 1 for Fall and November 1- December 20 for Spring.**

STUDENT INFORMATION

Name: _____
Last First Middle

Street address: _____

_____
City State Zip code

Gender: ❑ Male ❑Female

Home phone: ( ) _____

Email address: _____

Have you attended ECE courses before? ❑Yes ❑No

Are you dependent of an NWACC employee? ❑Yes ❑No

SSN: _____

Date of birth: _____ / _____ / _____
Day Month Year

Anticipated graduation date: _____ / _____
Month Year

RACE
❑ American Indian or Alaskan Native ❑Asian American
❑ Black/African, Non-Hispanic ❑White, Non-Hispanic

ETHNICITY
❑Hispanic ❑Non-Hispanic ❑Decline response

SCHOOL INFORMATION - Please check your high school

____040176 Ambassadors	____040175 Bentonville	____040580 Decatur	____ 040760 Farmington	____ 040770 Fayetteville
____040875 Gentry	____040930 Gravette	____040945 Greenland	____ 042147 Har-Ber	____ 042168 Heritage
____040414 Life Way Christian	____041405 Lincoln	____041995 Pea Ridge	____ 042105 Prairie Grove	____ 041472 Providence Academy
____042165 Rogers	____042313 Shiloh Christian	____042280 Siloam Springs	____ 042315 Springdale	____ 042610 West Fork

COURSE INFORMATION - Fall 2014

Check your course selections

✔	Course Title	✔	Course Title
	Art Appreciation		Intro to Hospitality
	Public Speaking		Intro to Medical Terminology
	English Comp I		Personal Health and Safety
	U. S. History to1877		Intro to Computer Information Systems

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	Test scores			Dates taken
ACT	E _____	M _____	R _____	_____
Compass	W _____	R _____	Alg _____	_____
EXPLORE	E _____	M _____	R _____	_____
PLAN	E _____	M _____	R _____	_____
PSAT	E _____	M _____	R _____	_____

High School Algebra I _____ Algebra II _____
Cumulative GPA: HS _____ NWACC _____
Pre-requisites met: _____ _____ _____
_____ _____ _____
Course Semester Grade

Verified by: _____

FERPA INFORMATION

The Family Educational Rights and Privacy Act (FERPA) provides students certain privacy rights including the right to have some control over the disclosure of their education records. For students under 18 years of age, educational information will be released to the parent signing this form. In the spaces below, list the names of individuals whom you authorize access to your educational records.

Name: _____ Name: _____

Allow release of information to above third party by phone? ❑YES ❑NO If YES, please provide a password to use by 3rd party for identification by phone _____

This release is valid ONLY while the student is enrolled in the Early College Experience program at NWACC.

SIGNATURES

I approve this student to take the course(s) listed above and confirm student has the appropriate prerequisites, placement scores & GPA.

Signature of School Official: _____ Title: _____ Date: _____

I certify that the information given is complete to the best of my knowledge. I understand that giving false information is grounds for denial of admission or immediate suspension if enrolled. I agree to abide by the rules and regulations of the college regarding conduct and other obligations.

Student signature _____ Date _____

Name of Parent or Guardian _____ Signature of Parent or Guardian _____
Required if student is under 18 years of age