

Online Application Done):

Yes ☐

No ☐



Dual Enrollment & Policy Form Fall 2026 & Spring 2027

Student Name: _____ Social Security Number: _____

Date of Birth: _____ High School: _____ Graduation Year: _____

<u>Course Prefix-</u> <u>ENG 1003</u>	<u>Course Title- Comp I</u>	<u>Campus (High School or ASUN)</u>	<u>Fall or Spring</u>

As the student enrolled in the ASUN Concurrent Enrollment Program, I hereby:

1. Grant ASU-Newport permission to release and receive information to the parent/guardian whose name and signature appears on the Parent Consent Form and authorized personnel at my high school, thereby waiving my rights to privacy under the Family Education Rights and Privacy Act (FERPA).
2. Understand that to drop a Dual Enrollment course the appropriate paperwork must be complete and submitted to the ASU-Newport Early College Programs – Concurrent. Please be aware of the final drop date for the semester/term.
3. As a Dual Enrolled Student, ASUN will place you on the Roster for the Access to Accelerated Learning Scholarship for \$65.00 per credit hour. If you are ineligible for the scholarship, you may receive a bill for tuition and fees. You may be responsible for any books or materials needed for the class.

Student Email: _____ Phone: (_____) _____

Student Signature: _____ Date: _____

Please complete
Parent Consent Form
on back.

Office of Early College Programs - Concurrent, ASU-Newport,
7648 Victory Blvd., Newport, AR 72112
Phone: (870) 512.7800



Concurrent Enrollment Parent Consent Form

ASU-Newport Early College Programs – Concurrent, provides enrichment opportunities for high school students who have excelled academically.

As the parent (or legal guardian) of _____
(Please print clearly and use full legal name of child)

I hereby consent to his/her enrollment in the ASU-Newport Early College Programs - Concurrent. In addition to such consent, I hereby acknowledge and accept the following:

1. My student must meet certain requirements set forth in the ASU-Newport Student Handbook and ASU-Newport Catalog. Concurrently enrolled students are expected to meet the same standards of achievement as the postsecondary students enrolled at ASU-Newport.
2. My student can earn college academic credit because of his/her enrollment and successful completion of the program. The credits earned from this coursework will be a permanent part of my student's collegiate record, maintained in ASU-Newport student records.
3. I understand courses that are not part of the Arkansas State Minimum Core may not be transferable or applicable to my student's postsecondary degree. You can view how general education courses transfer to various Arkansas public colleges and universities via the Arkansas Department of Higher Education Course Transfer System (ACTS) [Arkansas Division of Higher Education \(adhe.edu\)](http://adhe.edu).
4. I understand colleges may consider concurrent courses, even those not applicable to my student's degree, as attempted hours when evaluating Satisfactory Academic Progress (SAP) for determining Financial Aid awards. At ASU-Newport, all college level courses attempted and earned are considered for calculating SAP.
5. I understand my student's ASU-Newport record is protected under the Family Educational Rights and Privacy Act (FERPA).
6. I understand that ASUN will place my student on the roster for the Access to Accelerated Learning Scholarship for \$65.00 per credit hour. If they are ineligible for the scholarship, you or the student may receive a bill for tuition and fees. You or the student may be responsible for any books or materials needed for the class

Parent (or Legal Guardian) Information:

Name (please print clearly): _____

Relationship to student: _____

Address: _____

City: _____ Zip Code: _____ Phone: (_____) _____

Parent/Guardian Email: _____ Date: _____

Parent/Guardian Signature: _____

Do you approve of your child taking online classes? YES ☐ NO ☐

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