

For Office Use: ____ Placement Test ____ UCC Application ____ Registered for classes
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A. COMPLETED BY STUDENT (PLEASE PRINT)

Name: _____
Address: _____
E-mail: _____
Telephone: _____ Birth date: ____/____/____
UCC 800 number _____

B. ASSURANCES TO BE COMPLETED BY STUDENT *Please place your initials by each statement*

- By enrolling in the Advanced Diploma I understand I will dually enroll at UCC and SUHS. _____
- I understand that I need to register in and maintain enrollment* in 9-12 college credits per term. _____
- I understand that I will pay a \$100 book deposit prior to fall term. This deposit will be returned along with my diploma when I have returned all textbooks and completed the conditions of my cohort. _____
- I understand no books will be purchased for class changes which occur less than three weeks prior to the start of a term. _____
- I understand that if I fail to meet satisfactory academic progress for one term my Advanced/Transfer Diploma status will come under review and I will be placed on Academic Probation _____
- I understand that if I fail to meet satisfactory academic progress for two terms I will lose my standing in the Advanced/Transfer Diploma cohort. _____
- I understand that the goal is to complete 36 college credits in the 2024-2025 school year in order to earn the South Umpqua High School Advanced Diploma. _____
- I understand that I will meet one time per month at UCC with the Advanced/Transfer Diploma advisor/mentor. **If I fail to attend these meetings, I will lose my standing in the cohort.** _____
- I understand that I am not allowed to drop from any UCC class past the official drop date of each term. If I choose to drop a class after the drop date of the term, **I will be financially responsible for all costs.** _____
- **It is my responsibility to contact the advisor/mentor if I am experiencing difficulties in any of my UCC classes.** _____
- **If I fail a course (s), have not contacted the advisor/mentor, and have not demonstrated that I maintained 90 % attendance in the course, I will be financially responsible for all costs related to that course.** _____
- I understand that the FAFSA and other means of financial aid (scholarships, etc.) **will not be available** to access while I am enrolled in this program. _____
- I understand that I must complete an Advanced Diploma Program Official Withdrawal form if I choose to leave the Advanced/Transfer Diploma program before the end of the school year. If it is after the start of a term, I must contact my Advanced Diploma mentor/advisor to discuss my official withdrawal from the program. _____
- I understand that I must complete UCC admission requirements and submit this application form by **April 5, 2024. I must register for classes by May 17, 2023.** _____

**Maintain Satisfactory Academic Progress – earn a letter grade of A, B, C.*

C. REQUIRED SIGNATURES

I understand all eligibility criteria and guidelines for participation in the Advanced Diploma program.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____