

Office of Admissions

Student Education and Enrichment Enrollment Form

We are pleased that you have chosen to take advantage of the concurrent enrollment option. The following program allows you to take Metropolitan State University of Denver classes for college credit while you are still enrolled in high school. What a great way to get a jump start on your higher education! The Student Education Enrichment (SEE) is for high school students under twenty-one years of age, this program allows then to enroll in college courses at MSU Denver as a non-degree-seeking student under the SEE Program.

You are required to submit information to Metropolitan State University of Denver and register for classes in the same way regularly admitted students do. There are five steps in this process; those marked with an asterisk must be completed each semester you intend to enroll in MSU Denver courses through concurrent enrollment.

- 1) Admissions Application: You can obtain an application from your high school counselor or by going to msudenver.edu/admissions and using the Online Application or Printable Application.
- 2) Complete the Enrollment Form (this packet)*: This form must be submitted for every semester the student intends to be concurrently enrolled. Email this form to askmetro@msudenver.edu.
- 3) Apply for and authorize COF (Colorado Opportunity Fund): All post-secondary students must fill out and submit the College Opportunity Fund application online at www.CollegeinColorado.org
- **4)** Register for classes*: For advising on what classes to take, please contact Brandy Swanson at bswans10@msudenver.edu.

5)	Pay for Tuition and Fees*	TERM	APPLICATION DEADLINE	CLASSES BEGIN	PAYMENT DEADLINE
		Spring 2017	December 4, 2016 at 5 p.m.	January 17, 2017	January 13, 2017
		Summer 2017	May 9, 2017 at 5 p.m.	June 6, 2017	June 3, 2017
		Fall 2017	June 16, 2017 at 5 p.m.	August 21, 2017	August 18, 2017

SECTION A: To be completed by student (PLEASE PRINT)

Student Legal Name:			
•	Last	First	MI
Date of Birth:	Age:	SASIS #:	
Mailing Address:			
	Number and Street or Pos	st Office Box, City, County, State Zip Co	de
Student Phone:	Student Er	nail:	
Name of Parent/Legal Guard	ian:		
Term (Fall/Spring):	Year:		
Grade/Year in High School:			
High School Name:			
School District:	Pla	nned High School Graduation	Date:

SECTION B: To be completed by Student and Parent/Guardian

Attention student and parent/guardian: Your signature indicates that you wish the above named student to participate in a concurrent enrollment program and agree to the following:

- 1) In compliance with the Family Educational Rights and Privacy Act (FERPA) of 1974, the student gives permission to the above noted college to report absences, disciplinary issues, and the release of grades, transcripts, in progress grades, and class schedules, as available, to the above noted high school for the courses enrolled under the Concurrent Enrollment Program at MSU Denver.
- 2) The signatures indicate authorization of the student's College Opportunity Fund (COF) to the University and authorize the high school/school district to release his/her SASID # to the University for the purpose of COF.
- 3) The student understands that he/she will be responsible for all tuition and fees under the Student Education & Enrichment Program.

In signing this agreement, I authorize the college to release my transcript to my school district at the end of the course and agree to all information under Sections A and B.

Student Signature:		Date:	
Parent/Guardian Signature:		Date:	
SECTION D: Metropolitan State Univ	versity of Denver Administration App	oroval	
Signature	Title	Date	