

CONCURRENT ENROLLMENT ON-CAMPUS APPEAL FORM

For registering for classes after the deadline has passed

The Concurrent On-Campus general registration window closes on May 31 for Fall semester and December 15 for Spring semester. This allows SLCC to return empty seats that have been reserved for concurrent enrollment students back to the academic department so that full-tuition-paying adult students can claim those seats. If there continue to be seats available once those empty seats have been returned to the academic department on the dates listed above, CE students may submit an appeal to the SLCC academic department associate dean to be registered in the class as a concurrent enrollment student. Academic departments have the right to deny any appeals based on the needs of their department and the full-tuition-paying adult student demand for those classes. Once the "Last Day to Add Classes" date has passed no appeals will be accepted.

Only students who meet the qualifications to participate listed on the SLCC Concurrent On-Campus web page are eligible for an appeal. These qualifications include:

- You must be counted in the Average Daily Membership of a participating high school within the SLCC service region, throughout the entire semester that you are taking the class on our campus.
- You must have a 2.5 or higher cumulative GPA.
- You must be a 11th or 12th grader and be able to demonstrate that on your high school transcript. No appeals for 9th and 10th graders are allowed.
- You must complete [USHE Concurrent Enrollment Application](#) and be admitted to SLCC.
- You must meet any course prerequisites listed on the [CE Course Offerings](#) page for courses you wish to register in, as well as meet any high school prerequisites outlined by your high school.
- You cannot take more than 3 classes on a SLCC campus.

Instructions:

Complete this form, the CE On-Campus MOU (<https://myce.slcc.edu/student/>), and gather the required documentation listed below. Forms submitted without ALL fields completed below and ALL required documentation will be denied.

SECTION 1: STUDENT INFORMATION

Student First Name: _____ Student Last Name _____

High School: _____ Current SLCC GPA: _____

Grade in School: _____ High School GPA: _____

Student SLCC Email Address: _____ S Number: _____

CE Coordinator Name: _____ CE Coordinator Email: _____

Counselor Name: _____ Counselor Email: _____

Course you are requesting (Course, CRN, Day/Time): _____

SECTION 2: REQUIRED DOCUMENTATION

Students must include the following documentation with this completed appeal form:

1. A written and signed letter on official high school letterhead from BOTH the high school CE coordinator AND your high school counselor that outlines:
 - a. which On-Campus course, day, and time they are approving you to take,
 - b. verifies that you meet any necessary course prerequisites to take that course,
 - c. verifies that you are a junior or senior in high school.

CONCURRENT ENROLLMENT ON-CAMPUS APPEAL FORM

For registering for classes after the deadline has passed

SECTION 3: ACKNOWLEDGEMENTS

STUDENT: I understand that failure to include all of the required documentation listed above in section 1 and 2 will result in my appeal being denied. I understand that it is my responsibility to register myself if the appeal is granted. I understand that if I register for more than 3 classes on a SLCC campus I will be dropped from the extra classes. I understand that submitting an appeal, does not guarantee that my request for an exception to the Concurrent On-Campus registration window will be approved.

Student Signature: _____ Date: _____

HIGH SCHOOL CE COORDINATOR: I have provided the student a written letter of approval to register for the class listed on the form above and addressed all of the items listed above under Section 2.

HS CE Coordinator Signature: _____ Date: _____

HIGH SCHOOL COUNSELOR: I have provided the student a written letter of approval to register for the class listed on the form above and addressed all of the items listed above under Section 2.

High School Counselor Signature: _____ Date: _____