



2016-2017 Dual Enrollment Application/Registration Form for Classes Taught in High School

BCC ID. No. _____ if available Email: _____
(please print email address clearly)

Last Name **First Name** **Middle** **Male** **Female**

_____/_____/_____
Street Address **Birth Date** **Social Security Number *Required**

City, State, Zip Code **Phone Number**

High School Name **Expected H.S. Graduation Date**

High School Class /Teacher	College Class (Example: US HISTORY I - HIS-111)	Credits *
1.		
2.		
3.		
Total Credits		

2016-2017 tuition rate per credit hour = \$69.25

(2 credits--\$138.50+ \$15 reg. fee = \$153.50)

(3 credits--\$207.75 +\$15 reg.fee = \$222.75)

(Math and Science courses are 4 credits --\$277.00 + \$15 reg. fee = \$292.00) Reg. Fee \$15 – Per year not per course

Total number of credits	
X credit rate of \$69.25	
+ Registration fee (per year) \$15.00	
Total	
(Check or Money Order Attached)	

Please make check/money order to:
Bergen Community College
(no cash accepted)

All grades will be reflected on a Bergen Community College transcript.

Approval and permission is granted for this student to participate in the Dual Enrollment Program. Pre-requisites for English and mathematics must be met.

_____/_____/_____
Signature - Guidance Counselor **Title** **Date**

_____/_____/_____
Signature – Administrator or Instructor **Title** **Date**

I understand that this form is to apply for dual enrollment credits at Bergen Community College for class/s taught in the High School. I certify that all information provided here is true and correct to the best of my knowledge.

_____/_____/_____
Signature of Student **Date** **Signature of Parent or Legal Guardian** **Date**

Please indicate if you previously registered for a dual enrolled course at BCC with a Yes or No _____

Transfer of Credits to NJ schools – www.njtransfer.org

Out-of-State Schools – check Transfer Policy