

**1<sup>st</sup> time Students – Online Enrollment Application must be filled out! – [www.asub.edu](http://www.asub.edu)**

**ASU-BEEBE/HIGH SCHOOL CONCURRENT ENROLLMENT & POLICY FORM**  
**Concurrent Enrollment Program Office-Kristine Penix-Phone: 501-882-8832 or 8809 Fax: 501-882-4412**

P.O. Box 1000, Beebe, AR 72012

Email: [kapenix@asub.edu](mailto:kapenix@asub.edu) or [dmlane@asub.edu](mailto:dmlane@asub.edu)

Fall	
Spring	
Summer I	
Summer II	

**REQUIRED (Please Print)**

STUDENT NAME: \_\_\_\_\_ Form required for each Semester:

HIGH SCHOOL: \_\_\_\_\_ STUDENT SS#: \_\_\_\_\_ DOB: \_\_\_\_\_

Other:

**Students MUST have a READING SCORE of 19 ACT, 83 COMPASS, or 78 ACCUPLACER to take any general education concurrent enrollment course.**

LINE NUMBER	CLASS TIME	CLASS DAY(S)	COURSE TITLE
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

**These Blocks for High School Personnel ONLY**

The above student is in good standing with our high school, has *at least a 2.5 GPA*, and is approved to take the CEP classes listed above.

This student is approved to take the above class(es) Online: \_\_\_\_\_ (Yes or No)

High School Grad Year: \_\_\_\_\_ Student GPA: \_\_\_\_\_

Principal, Counselor, or High School Designee Signature \_\_\_\_\_ Date \_\_\_\_\_

**ONLY High School Personnel Entered SCORES**

	ACT	COMPASS	ACCUP
ENG			
MATH			
RDNG			
SCI			
COMP			

	ACT	COMPASS	ACCUPLACER
Reading	19	83	78 or higher
English/Writing	19	80	83 or higher
			Writeplacer 5
Math	19 (On-campus 21)	42	42 or higher

- **College Algebra** requires a Reading score of 19 ACT, 83 COMPASS, or 78 ACCUPLACER **AND** 19 ACT, 50 COMPASS, or 42 ACCUPLACER in MATH.
- **English** requires a Reading Score of 19 ACT, 83 COMPASS, 78 ACCUPLACER **AND** 19 ACT, 80 COMPASS, or 83 ACCPLACER in English/Writing.
- **Biology** requires a Reading Score of 19 ACT, 83 COMPASS, OR 78 ACCUPLACER OR Freshman English I with a grade of C or better.

**(Please Read the Concurrent Student Handbook found at [www.asub.edu](http://www.asub.edu) or contact the Office of Concurrent Enrollment)**

**PLEASE READ THE FOLLOWING. BY SIGNING THIS FORM YOU AGREE TO EACH STATEMENT.**

I, the undersigned student, understand in order to enroll in concurrent classes I must meet certain requirements set forth in the ASU-Beebe Concurrent Student Handbook and ASU-Beebe catalog. I also understand that concurrently enrolled students are expected to meet the same standards of achievement as the traditional student body at ASU-Beebe and that I will receive college credit for the course work after successful completion of all course requirements as defined in the instructor's syllabus.

**I understand that payment of tuition is due at the time of registration.** When taking classes at the High School Campus during high school hours there is a difference between the regular tuition rate and the concurrent tuition rate. This difference will be considered an academic scholarship as required by Act 1451 of 2009. Students will be sent an income report 1098T for income tax purposes (unless tuition is paid for by the high school).

I understand that the grade received from these classes will go on my college transcript and toward my college Grade Point Average (GPA). With the Arkansas Department of Higher Education's Course Transfer System (ACTS) students can view how general education courses transfer from and to the various Arkansas public colleges and universities. Using this information, students, parents, and school personnel can select an institution from the list provided and view how courses transfer. Some majors will have different requirements and/or may substitute courses for their program. The Course Transfer System may be found at: <http://acts.adhe.edu/> Most institutions require a C or better for transfer.

Furthermore, I authorize ASU-Beebe to release and receive needed records, information, and my final grades to/from my parent(s) or legal guardian(s) and authorized personnel at my high school.

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

<p style="text-align: center;"><b>Do you the Parent/Guardian approve your child for Online Classes:</b></p> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Yes or No)</p>
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