



ADMISSIONS & RECORDS OFFICE
 1900 Pico Blvd. ♦ Santa Monica, CA 90405 ♦ Phone: 310-434-4380 ♦ Fax: 310-434-3645
High School Concurrent Enrollment Application

| TO BE COMPLETED BY THE STUDENT | | | |
|---|-------------------------|---|--|
| Last Name: | First Name: | Middle Name: | |
| SMC ID: | Phone: | Email: | |
| Applying for: <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall Year: _____ One enrollment period per application | Name of High School: | Current Grade Level: | |
| | City & State of School: | Type of School: <input type="checkbox"/> Public High School <input type="checkbox"/> Private High School <input type="checkbox"/> Home School* <input type="checkbox"/> Charter School <small>*An Affidavit is required for a student participating in a home school program</small> | |

| STUDENT CHECKLIST | |
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| Have all of the following items been completed or submitted? | |
| <ul style="list-style-type: none"> An online SMC application has been submitted. (smc.edu/CCCapply) The most recent and complete Middle School or High School transcript, issued by the institution, is attached. If homeschooled, also include a copy of your school's Affidavit. High school official's signatures and seal are provided. Assessment test completed for courses with Math and/or English prerequisites, or placement waiver (based on AP scores or college coursework) secured. (smc.edu/assessment) Parent/Legal Guardian signature on opposite page. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Transcript attached <input type="checkbox"/> Affidavit attached (if required) <input type="checkbox"/> Signatures <input type="checkbox"/> School Seal <input type="checkbox"/> Completed <input type="checkbox"/> N/A <input type="checkbox"/> Completed <input type="checkbox"/> N/A (if over 18) |

| HIGH SCHOOL COUNSELOR & PRINCIPAL'S AUTHORIZATION | | | | | |
|---|----------------------|------------------------|-----------------------|-----------------------------------|----------|
| Specify courses as listed in the SMC class schedule (e.g., History 11 or Math 2). Additional course recommendations may be emailed by the high school counselor* listed below and sent to concurrentenrollment@smc.edu | | | | School Seal or Stamp is Required: | |
| Course Subject: _____ | Course Number: _____ | OFFICE USE ONLY | Course Subject: _____ | Course Number: _____ | REQUIRED |
| _____ | _____ | OFFICE USE ONLY | _____ | _____ | |
| _____ | _____ | OFFICE USE ONLY | _____ | _____ | |
| Required Counselor Certification (all students): The above named student has been authorized to enroll in any of the courses above, subject to SMC's unit limitations and enrollment requirements. By providing my signature, and applying my school's official seal to this form, I am certifying the student is prepared to undertake college-level work in the courses above. (Please cross-off any blank or unused course recommendation spaces) | | | | | |
| Counselor's Name (Please print): | Counselor's Phone: | Counselor's Signature: | | Date: | |
| Principal's Certification (Summer terms only): Per California Education Code Section 76001, the principal of the public school certifies, by signing this application that no more than 5% of the total number of pupils per grade level shall be recommended for concurrent enrollment during the SMC summer session. | | | | | |
| Principal's Name (Please print): | Principal's Phone: | Principal's Signature: | | Date: | |

| FOR OFFICE USE ONLY | |
|--|--|
| Application Checklist: <input type="checkbox"/> Active Application <input type="checkbox"/> Counselor's Signature <input type="checkbox"/> Specific Term <input type="checkbox"/> Principal's Signature (Summer Term Only) <input type="checkbox"/> School Seal | <input type="checkbox"/> Prerequisites met/Assessment taken (if applicable) <input type="checkbox"/> Parent/Legal Guardian Signatures <input type="checkbox"/> Student's Signature <input type="checkbox"/> Homeschool Affidavit (if applicable) <input type="checkbox"/> Recent Transcript <input type="checkbox"/> GPA <2.0* <small>*If below 2.0 student must submit Petition for Special Consideration</small> |
| Received by: _____ Received date: _____ | |



High School Concurrent Enrollment Policies & Requirements

High School Concurrent Enrollment permits high school students the opportunity to enroll in courses at Santa Monica College for educational enrichment to a limited number of eligible students as defined in the California Education Code, Section 48800 and 76002.

POLICIES AND REQUIREMENTS

1. Students must have completed the 8th grade or equivalent prior to the beginning of the semester or term they plan to participate in the program.
2. Students will only be permitted to enroll in classes approved by the counselor.
3. The High School Concurrent Enrollment application must be signed by the counselor and the high school principal, and embossed or stamped with the high school's official seal.
4. Home school students must provide the official affidavit.
5. Students must meet any English, Math, and/or other course prerequisites.
6. Applicants must submit a copy of their complete school transcript showing all school courses completed to date.
7. Effective Spring 2015, participating students are exempted from enrollment fees and non-resident tuition, if they are physically attending a high school in California. Out-of-State resident and nonimmigrant students (e.g., F1 & F2 visas) do not qualify for the fee exemption. High School students are required to pay for additional fees such as parking, course materials, books, and health fees. The Student ID fee is optional but must be paid if the student wishes to receive an SMC ID card.
8. Students are limited to six units, or two classes, per semester or term.
9. Students will not be allowed to take courses in subject areas where the student previously received a grade below a C, whether taken at the college or high school level.
10. A 2.0 high school cumulative GPA is required to participate.
11. Students will not be permitted to enroll in any physical education courses.
12. Credit courses are college courses and will remain on the student's permanent Santa Monica College transcript.
13. Students may be exposed to and be involved in discussions of mature subjects.
14. Santa Monica College is not responsible for the supervision of minor students anywhere on campus. Parents may not attend class with students.
15. Students must adhere to all college policies on course requirements, attendance, dates and deadlines, and any other applicable policies and procedures including the Student Code of Conduct. See college catalog or schedule of classes for policies.
16. Students must act on their own behalf. Parents, legal guardians, relatives, or friends of Santa Monica College students are not permitted to enroll, drop, or add classes on behalf of the student. **Students giving parents their ID and password are in violation of our Computer Use Policy and may be subject to disciplinary action or denial of access to the student portal.** The same prohibition applies to requesting transcripts. Student records are protected under the Family Educational Rights and Privacy Act (FERPA). Therefore, SMC will not discuss or release student information to anyone, including parents, without the student's signed written consent.
17. Once admitted, students may not participate in extra-curricular activities at SMC.
18. F-1 and other select non-immigrant Visa students are not eligible to enroll as High School Concurrent Enrollment students. F-2 visa students, with required documentation, may be admitted to the program – contact concurrentenrollment@smc.edu for details.

PARENTAL / LEGAL GUARDIAN CONSENT TO ENROLL AND PROVIDE TREATMENT

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| <ul style="list-style-type: none"> I authorize my son/daughter to enroll in the Santa Monica College High School Concurrent Enrollment Program for the term specified above. All SMC students have the right to utilize the services offered by the SMC Health Center. I hereby consent for my minor son/daughter to receive nonemergency services such as first aid, health counseling, nursing assessments, or any other care when determined advisable by and rendered under the supervision of a Health Services Registered Nurse or practitioner. If unable to reach me in an emergency, I consent for my minor son/daughter to receive reasonable treatment under the general or specific instruction of Santa Monica College Health Services. | Initial for "Yes" or check for "No" below: Yes: _____ <input type="checkbox"/> No Yes: _____ <input type="checkbox"/> No Yes: _____ <input type="checkbox"/> No |
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STUDENT & PARENT/LEGAL GUARDIAN AGREEMENT – SIGNATURES REQUIRED

| I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE POLICIES AND REQUIREMENTS | | |
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| Student's Name (Please print): | Student's Signature: | Date: |
| Parent/Legal Guardian Name (Please print): | Parent/Legal Guardian Signature (Required if Student is under 18): | Date: |
| Daytime Phone Number: | Evening Phone Number: | |