

Wallace Community College Wallace Campus in Dothan • Sparks Campus in Eufaula

Wallace Campus in Dothan • Sparks Campus in Eufaula
Application for Dual Enrollment/Accelerated Credit



This application is for accelerated credit and/or dual enrollment purposes. Once you have graduated high school, you must complete WCC's regular Application for Admission to be admitted as a college student.

For Office Use Only: Student #	Photo ID		Staff	Date_	
Which WCC campus will you attend? □Wallace Campus in Dothan			oarks Campus in Eu	ıfaula	
What term do you plan to enroll? □Fall □Spring □]Summer	Year			
Social Security NumberDate	e of Birth				
Name					
Last Name		First Name		Middle Name	
If applicable, please provide any other names under which t	ranscripts from ot	her institutions r	nay be listed		
Address		County	Ci	ity, State, Zip	
Home PhoneCell Phone	Employer_		Er	mployer's Phone	
E-mail		_Alternate Email			
High School You Attend?		City/	State	Anticipated Year o	f Graduation
Name of person to notify in case of emergency				Phone Number	
Have you lived in the State of Alabama for the past twelve n	nonths? □Yes	□No	Are you a Un	ited States Citizen? □Yes	□No
Self-identification of information regarding sex, ethnicity, and race is optional. If you choose to self-identify, the information will be used only for federal/state reporting and will not affect the admission decision in any way. Sex: Male					
What is Your Ethnicity: □Hispanic or Latino □No	ot Hispanic or Lat	ino			
What is Your Race: (You may choose one or more of the listed categories.) ☐ Asian ☐ American Indian or Alaskan Native ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White					
The College may release directory information without obtaining permission from the student. Examples of directory information include but are not limited to, student's name, address, telephone number, program of study, dates of attendance, and degrees awarded.					
Do you wish to sign a non-release of directory information? Yes The College will honor your request to withhold directory information but cannot assume responsibility to contact you for subsequent permission to release it. Regardless of the effect upon you, the College assumes no liability for honoring your instructions that directory information be withheld.					
Have you previously attended any college other than W					
Name of Institution	City/St	ate	Dates of Attendar	nce Degree Earned	Are you on suspension?
I certify that the information contained on this application is true and correct to the best of my knowledge. I understand that any false statements or information may result in disapproval of this application or expulsion from Wallace Community College.					
Signature			Da	ate	

Wallace Community College (WCC) is committed to equal opportunity education. The College is guided in philosophy and practice by the principle that individuals shall not be treated differently because of race, creed, religion, color, sex, age, national origin, or disability, and that legitimate and reasonable access to facilities shall be available to all. This principle particularly applies to the admission of students in all programs of the College in their academic pursuits. It is also applicable in extracurricular activities, all student development services, employment of students by the College, and employment of faculty and non-instructional staff. Therefore, WCC is in compliance with Title VI and VII of the Civil Rights Act of 1964, as amended; the Civil Rights Act of 1991: Executive Order 11246, as amended; Title IX of the Educational Amendments of 1972; Section 504 of the Rehabilitation Act; and the Americans with Disabilities Act of 1990. Wallace Community College is an Affirmative Action/Equal Employment and Educational Opportunity Institution. If you require special accommodations under ADA, please let us know.