



# ST. CLAIR COUNTY COMMUNITY COLLEGE

## Early Admission Application

[www.sc4.edu](http://www.sc4.edu)

## High School Guest

STUDENT TAKES COLLEGE COURSE(S) WHILE STILL ENROLLED IN HIGH SCHOOL. STUDENT PAYS FOR TUITION AND FEES, AS WELL AS BOOKS AND MATERIALS NEEDED FOR THE COURSE(S).

**Required for every student, every semester, when seeking high school guest enrollment:**

**Apply for high school guest admission each semester**

Students need to obtain an Early Admission Application from a high school counselor, online at [www.sc4.edu/counselors](http://www.sc4.edu/counselors) or at the One-stop Student Service Center (first floor, SC4 Welcome Center). The application needs to be fully completed with the course(s) the student plans on registering for listed on page 4 of the application. Students must select a program of study even if not planning to pursue a degree at SC4. If taking classes for transfer to another college/university, please see the program offerings listed under transfer associate degree programs. If the student is younger than age 18 when applying, the application must be signed by a parent or guardian.

For students who are not high school age (middle school or younger), admission may be granted on a conditional, semester-by-semester basis. Contact the Registrar's office at (810) 989-5550 for details.

## Dual Enrollment

STUDENT TAKES COLLEGE COURSE(S) WHILE STILL ENROLLED IN HIGH SCHOOL. STUDENT'S HIGH SCHOOL PAYS FOR ALL OR A PORTION OF THE TUITION COSTS ASSOCIATED WITH COURSE(S).

STUDENT PAYS FOR ANY TUITION FEES, BOOKS, AND MATERIALS NOT COVERED BY THE HIGH SCHOOL.  
COMPLETED COLLEGE COURSE(S) MAY COUNT TOWARD HIGH SCHOOL GRADUATION CREDIT AND COLLEGE CREDIT.

**Required for every student, every semester, when seeking dual enrollment:**

**Apply for dual enrollment admission each semester**

1. It is highly recommended that students who are interested in dual enrollment meet with their high school counselor to discuss eligibility, course options, and their high school's dual enrollment expectations prior to applying.
2. Students need to obtain an Early Admission Application from a high school counselor, online at [www.sc4.edu/counselors](http://www.sc4.edu/counselors) or at the One-stop Student Service Center (first floor, SC4 Welcome Center). The application needs to be fully completed with the course(s) the student plans on registering for listed on page 4 of the application. Students must select a program of study even if not planning to pursue a degree at SC4. If taking classes for transfer to another college/university, please see the program offerings listed under transfer associate degree programs. If the student is younger than age 18 when applying, the application must be signed by a parent or guardian.

For students who are not high school age (middle school or younger), admission may be granted on a conditional, semester-by-semester basis. Contact the Registrar's office at (810) 989-5550 for details.

3. The student's high school principal **must** sign and initial the application in question 14 on page 4 to indicate that the student qualifies for dual enrollment.

**Mission**  
Our mission is to maximize student success.

**Non-Discrimination Policy**  
SC4, an equal opportunity institution, is strongly and actively committed to increasing diversity within its community.

**Accreditation**  
SC4 is accredited by The Higher Learning Commission and is a member of the North Central Association of Colleges and Schools: [www.ncahigherlearningcommission.org](http://www.ncahigherlearningcommission.org) or (312) 263-0456.

Return to: SC4 Welcome Center, attn: One-stop Student Service Center • 323 Erie St. • P.O. Box 5015 • Port Huron, MI 48061-5015  
(810) 989-5500 • (800) 553-2427, Ext. 5500 • Fax (810) 989-5541 • [enrollment@sc4.edu](mailto:enrollment@sc4.edu)

# Registration checklist for High School Guest and Dual Enrollment Students

## ☐ Students applying for the **first time** must complete the following steps:

### 1. Academic Assessments

SC4 requires all new students to complete pre-registration assessments of their math, reading, and writing skills. The scores will be used to ensure proper course placement. Call (810) 989-5555 to schedule your assessments. Students also may submit ACT or SAT scores for course placement, which may be available from your high school counseling office.

### 2. Academic Advising

SC4 requires all first-time high school guest and dual enrollment students to meet with an advisor. The advising appointment helps students plan for classes for the first semester and obtain information regarding degrees/certificates. Call (810) 989-5520 to schedule an appointment.

### 3. Activate your SC4 Portal

The SC4 Portal is a critical piece of your college experience. From within your portal, you can check your student email, register for classes, and more. Your SC4 acceptance letter provides you with username and password detail; use this information to activate your portal account. Contact the One-stop Student Service Center at (810) 989-5500 with questions.

### 4. Register and Pay for Classes

Once you have completed the above enrollment steps, you may register and pay for any remaining tuition balance, if applicable, either online at portal.sc4.edu or in the One-stop Student Service Center, first floor, SC4 Welcome Center. Some college courses may cost more than the tuition cap indicated by your high school. Be sure to pay any remaining tuition balance to ensure your seat in class.

### 5. Get photo taken for Skippers OneCard

Visit second floor, SC4 Welcome Center, to get your student ID photo taken. You must provide photo ID (valid driver license, state ID or passport) to verify identity.

### 6. Buy textbooks

Books may be bought at the College Bookstore on the Port Huron campus or ordered online at www.sc4bookstore.com. Call (810) 989-5725 to find out when books will be available for purchase and for store hours.

## Programs of Study (five-letter program codes)

Please select a program code that closely matches your potential field of study  
(you may change your program at a later date)

Category	Minimum number of credits	Approximate time frame (attending full time)	Description
Skill Sets*	16	1 semester	Programs designed as building blocks to certificate programs
Certificate*	30	1 year	Programs designed to prepare students for entry-level careers
Associate degrees (AAS – Applied Arts & Science)	62	2 years	Programs designed to prepare students for employment in a specific career field
Transfer associate degree programs	62	2 years	Programs designed to prepare students for transfer to a four-year college or university

### Skill Sets

SSMKI Internet Marketing  
SSMKS Professional Sales

### Certificate programs

#### (Occupational)

CERGB Business, General  
CERAP Computer Information Systems  
– Applications for Business  
CERTE Engineering Technology  
CERMN Management, Professional Certification  
CERMK Marketing  
CERPM Paramedic

### Allied health programs

#### (Certificate programs)

AGEGE Medical Assisting  
AGEGE Nursing, Practical

#### (Associate degree programs)

AGEGE Health Information Technology  
AGEGE Magnetic Resonance Imaging  
AGEGE Nursing – Associate Degree Nursing (ADN)  
AGEGE Radiologic Technology

Note: These programs require a secondary application and admittance to the program.

### Associate degree programs

#### (AAS - Applied Arts & Science Occupational)

AASAC Accounting  
AASGB Business, General  
AASIS Computer Information Systems  
AASCN Computer Information Systems – Networking  
AASPR Computer Information Systems – Programming  
AASWD Computer Information Systems – Web Development  
AASCR Criminal Justice – Corrections  
AASCL Criminal Justice – Law Enforcement  
AASER Engineering Technology – Electronics  
AASEG Engineering Technology – Engineering Graphics/CAD  
AASEM Engineering Technology – Mechatronics  
AASEP Engineering Technology – Precision Machining  
AASEA Engineering Technology – Renewable and Alternative Energy  
AASEW Engineering Technology – Welding and Fabricating  
AASGD Graphic Design  
AASMN Management – Business  
AASMK Marketing  
AASTM Therapeutic Massage

### Transfer associate degree programs

#### Associate in Business – ABTGB

Accounting General Business  
Economics Management  
Finance Marketing

#### Associate in General Education – AGEGE

#### Associate in Liberal Arts – AATLA

Anthropology Journalism  
Art Linguistics  
Communication Music  
Criminal Justice Political Science  
Education Pre-Law  
English Pre-Psychology  
Fine Arts Pre-Social Work  
Graphic Design Pre-Sociology  
History

#### Associate in Science – ASTSC

Agricultural Science Pre-Dentistry  
Biology Pre-Engineering  
Chemistry Pre-Medicine  
Forestry Pre-Occupational Therapy  
Mathematics Pre-Pharmacy  
Physical Science Pre-Physical Therapy  
Physics Pre-Veterinary Medicine

\* The U.S. Department of Education requires institutions who participate in financial assistance programs to disclose information regarding gainful employment to prospective students who may pursue certain certificate programs. This information includes, but is not limited to, program costs, graduation rates, median debt of those who have completed a program, etc. This information for SC4's Skill Set/Certificate programs can be found at <https://www.sc4.edu/about/consumer-information/gainful-employment-program-disclosures/>.

# Early Admission Application

<b>FOR OFFICE USE ONLY</b>
Student No. _____

**1. Name** \_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE FORMER (if applicable)

**2. Address** \_\_\_\_\_  
NUMBER STREET APT. CITY STATE ZIP  
*Student must provide a street address; a P.O. Box cannot be used to determine residency for tuition purposes.*

**3. County of residence**  St. Clair  Sanilac  Macomb  Huron  Lapeer  
 Other \_\_\_\_\_

**4. Phone** ( ) \_\_\_\_\_ **Alternate** ( ) \_\_\_\_\_

**5. Email address** \_\_\_\_\_ @ \_\_\_\_\_ **UIC Number** \_\_\_\_\_  
*Contact your high school counselor for your unique identification code.*

**6. Social Security Number** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ **Date of birth** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MONTH DAY YEAR  
*You are required (by the federal government) to provide your SSN if you will need your tuition information for federal tax credits.*

**7.** This optional information provided is held confidential and is not used by SC4 for admission purposes.

- a. Ethnicity:**  HISPANIC/LATINO  NON-HISPANIC/NON-LATINO
- b. Race:**  AMERICAN/ALASKA NATIVE  BLACK/AFRICAN AMERICAN  WHITE  NON-RESIDENT ALIEN  
 ASIAN  HAWAIIAN/PACIFIC ISLANDER  RACE/ETHNICITY UNKNOWN
- c. Gender:**  MALE  FEMALE

**8.** Are you a dependent of a veteran, an active member of the military, a member of the National Guard or military reserves?  
 Yes  No

**9.** If yes, then please check one of the following:  Active Duty  Military Reserves  National Guard  Veteran  
 Branch of service: \_\_\_\_\_

**10. Starting semester:**  FALL 20 \_\_\_\_ (begins in August)  
 SUMMER 20 \_\_\_\_ (begins in May)  
 WINTER 20 \_\_\_\_ (begins in January)

**11. What is your intended program of study?**  
*(See detail on Programs of Study for five-letter program code.)*       
 Program description: \_\_\_\_\_

## 12. High school information

NAME OF HIGH SCHOOL CURRENTLY ATTENDING \_\_\_\_\_ CITY/STATE \_\_\_\_\_

**Grade in which you are currently enrolled:**  9  10  11  12 **Anticipated date of graduation:** \_\_\_\_\_ / \_\_\_\_\_  
MONTH YEAR

### 13. Additional signatures

- By checking this box, I give my consent to St. Clair County Community College to review my academic record and confer an educational credential upon satisfaction of all degree/certificate requirements.
- I certify that all answers I have given are complete and accurate, and hereby grant SC4 permission to release any records requested by my high school.
- I understand that my high school may hold me responsible for reimbursement of tuition and fees should I fail a course(s) for which the school district paid.
- I understand that the official policies and procedures of SC4 are published in the College Catalog at [catalog.sc4.edu](http://catalog.sc4.edu).

\_\_\_\_\_  
Parent/legal guardian's signature (not required if age 18 or older) \_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's signature \_\_\_\_\_  
Date

### 14. Intended course(s) of enrollment

Filling in course information directly below **does not** automatically enroll a student for his/her course(s). Students **must register** for classes. (Reminder: Students may register by completing the registration form in question 15, online via their SC4 Portal, or in the One-stop Student Service Center, first floor, SC4 Welcome Center on the Port Huron campus.)

Course will be used to fulfill high school graduation requirements	Course Discipline/ Number	Section #	Credit Hours	Contact Hours	Course will be paid for through dual enrollment	Payment cap	Dual enrollment approved If yes, principal must Initial
<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____	_____ PRINCIPAL'S INITIALS
<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____	_____ PRINCIPAL'S INITIALS
<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____	_____ PRINCIPAL'S INITIALS
<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____	_____	_____	<input type="checkbox"/> YES <input type="checkbox"/> NO	\$ _____	_____ PRINCIPAL'S INITIALS

#### Approved for dual enrollment

This form must be signed by the high school principal to approve participation in dual enrollment at SC4. In addition, the high school principal must initial in the box above indicating the school's payment responsibility and payment cap that may be applicable.

\_\_\_\_\_  
Principal's signature \_\_\_\_\_  
Date

### 15. Register for classes

REGISTER / ADD		
Dept.	Course #	Sect. #
Example SC4	101	01

- I accept responsibility for the selection of the class(es) listed above, including prerequisites. I understand that I am responsible for all tuition and fees the school district does not pay. This includes, but is not limited to, the non-refundable student fee for dropped courses. I am responsible for all adjustments to my schedule by the appropriate deadline dates.
- I understand that it is my responsibility to drop my course(s) should I decide to not participate as a High School Guest or Dual Enrolled student, or if I move away from the school district that originally agreed to pay my tuition.
- I understand that dropping a class(es) with a "W" grade may impact my eligibility for financial aid in future semesters. I accept the responsibility for contacting the Financial Aid office at (810) 989-5530 with questions concerning how a "W" grade may affect any future award amounts.
- I accept that it is my responsibility to confirm my status as enrolled, waitlisted or ineligible for a class based on the information I provided above. I understand that I can access my class schedule through my SC4 Portal or by visiting the One-stop Student Service Center (first floor, SC4 Welcome Center).

Print Name: \_\_\_\_\_ **SC4 Student number or SSN:** \_\_\_\_\_

Signature: \_\_\_\_\_

**Disabilities:** For information regarding services provided by SC4, contact the Achievement Center at (810) 989-5759.

Visit [www.sc4.edu/consumer-information](http://www.sc4.edu/consumer-information) for details relating to higher education federal regulations, as well as college policies and statistics.