



SUBMIT THIS COMPLETED FORM through the ONLINE APPLICATION as a **Supplement** or email to **Admissions@oaklandcc.edu**. This form must be completed and submitted **EACH SEMESTER of attendance** as a High School dual enrolled student. Your Application will be **INCOMPLETE** until this form is received. Students must select between 1-4 desired OCC courses in the drop down list in Part 2.

PART 1

Select **ONE** semester: Fall Winter Summer Year 20 _____ OCC ID# _____ (if known)

STUDENT NAME _____ STUDENT DOB _____

EMAIL ADDRESS _____ HOME PHONE # _____ CELL PHONE # _____

Parent/Guardian and Student Agreement

PARENT/GUARDIAN NAME _____

PARENT EMAIL ADDRESS _____ RELATIONSHIP TO STUDENT _____

Select ONE

Self-Pay – Complete Part 1 only: The signatures below indicate an understanding that the student will be dropped from courses if payment is not made by published deadlines.

Dual Enrollment/Sponsored – Complete Part 1 and Part 2: The parent/guardian and student both understand that if for any reason the high school (public high school students) or State of Michigan (non-public high school students) does not pay for tuition and fees, the student’s family will be held responsible for the charges if the student fails to drop course(s) during the 100% refund period.

The parent/guardian and student hereby allows the release of all aspects of the student’s educational records, as allowed under the Family Educational Rights and Privacy Act (FERPA), and student finance information to the parent(s)/legal guardian(s) and the high school designee for district paid courses.

Refund dates are listed for each course (bit.ly/OCCrefund). Failure to pay will result in a hold on all records and future registrations. Delinquent accounts are turned over to a collection agency and will be assessed a fee of 39 percent (bit.ly/OCCtermsconditions).

I have read and accepted the terms and conditions of OCC’s financial responsibility policies and procedures.

STUDENT SIGNATURE _____

PARENT/GUARDIAN SIGNATURE _____

PART 2

High School Dual Enrollment Authorization (*Completed by school official for sponsored payments*)

The school district approves the student for the dual enrollment option selected below and authorizes Oakland Community College to bill the school district (public high school) or State of Michigan (non-public high school) for charges incurred by the student until maximum funding is reached. (Note: Courses are subject to approval by high school counselor and seat availability). For questions regarding payments or billing, please contact ACCTSREC@oaklandcc.edu or 248.341.2263.

High School Sponsored (Dual Enrollment – Public School)
Authorized Courses for Third-Party Payments

State Sponsored (Dual Enrollment – Non-Public School)
District Authorizes Payment for OCC Course (Yes or No)

1. _____
2. _____
3. _____
4. _____

- | | |
|-----|----|
| Yes | No |
| Yes | No |
| Yes | No |
| Yes | No |

NAME OF SCHOOL OFFICIAL _____

PHONE NUMBER (WITH AREA CODE) _____

SIGNATURE _____

TITLE _____

SCHOOL NAME _____

DATE _____

DISTRICT NAME _____

Oakland ACE Oakland Technical Early College