Gadsden State Community College
Early College Enrollment Program (ECEP)

2015-2016 Application
(DUE March 31, 2015)

Section I
(Students and parents/guardians complete Section I)

Applicant Information

Applicant Name: _____   Applicant Date of Birth: _____

ECEP Program: _____   Student number: G000 _____

Address: _____
      (Street, Road, Apt #, etc..)   (City, State, Zip Code)

Home Phone: _____   Cellular Phone: _____

Work Phone: _____   Email Address: _____

Parent/Legal Guardian Information

Name(s) of Parent/Legal Guardian: _____

Address (if different): _____
      (Street, Road, Apt #, etc..)   (City, State, Zip Code)

Home Phone: _____   Cellular Phone: _____

Work Phone: _____   Email Address: _____

Section II
(School district/high school personnel complete Sections II and III)

High School Information

High School: _____School District: _____

High School Counselor: _____Counselor Phone Number: _____

Counselor Email: _____

Section III

Applicant Academic Qualifications

Grade/Class, c*urrent* (check one):   **Grade/Class, *next year*** (check one):

10th (Sophomore) ___   11th (Junior) ___   11th (Junior) ___   12th (Senior) ___

Diploma Type (check one):

Standard ___   Advanced ___   **Grade Point Average** (4.0 scale): _____

Met Alabama graduation exam requirements? (ie. ACT) Yes___ No___ N/A____

Number of high school credit's earned (as of date of application):

English Language Arts ___   Computer Applications ___   Mathematics ___

Science ___   Social Studies ___   Physical Education ___

Health Education ___   Arts Education ___   Electives ___

Foreign Language ___

If only 1 language credit, what language?_____

Dual Enrollment Credit(s)/Subject(s) _____

ACT scores: English ___   Mathematics ___   Reading ___

SAT scores: Writing ___   Mathematics ___   Critical Reading ___

Section IV

Signatures

_____   _____   _____   _____
Applicant   Date   Parent/Legal Guardian(s)   Date

_____   _____   _____   _____
High School Counselor   Date   High School Principal   Date

Initial statement after reading (student):

_____ (initial) by signing this application, I understand that my information and grades will be shared with my parents/legal guardians, Gadsden State Community College, and my high school/school district administration.