## HIGH SCHOOL DUAL ENROLLMENT APPLICATION

If this is your first application as a high school non-degree student at FAU, you will also have to print out the **non-degree residency form** and send that in, completed (with documentation).

Mail to: Demarus Johnson FLORIDA ATLANTIC UNIVERSITY Student Support Services Building, SU 80 145-O 777 Glades Road • Boca Raton, FL 33431

## FAX # (561) 297-2081

Student Social Security Number	Semester/Year	
Currently attends	High School Cu	rrent grade level
Year began current high school		
Anticipated year of high school graduation		
Name (Last, First, Middle or Maiden):		
Street Address (include city & state :		
Home Phone (include area code):		
Work Phone (include area code):		
E-mail Address:		
Date of Birth (month, day, year):	– Gender	
Ethnic Origin (select only one listed):	White (not of Hispanic Origin)	
	Black (not of Hispanic Origin)	
	Asian or Pacific Islander	
	Hispanic	
	American Indian or Alaskan Native	е
Nation of Citizenship		
Non U.S. Citizens only: Resident Alien #:		Other Visa Type
Issue Date:	Date Expires:	

I have at least a minimum of a 3.0 average in high school (eligible to enroll).	YES	NO	
If "NO", you are not eligible to attend FAU.			
If your answer to either of the following is "yes," you must submit a full explanator sheet attached to this form. The university will undertake to expeditiously review however, you may not register until the review is complete. False or incomplete redisciplinary action, cancellation of registration or invalidation of credits earned.	your request	for enrollment;	
Have you been found guilty by any school authorities or by any court to have disrupted or interfered with orderly conduct, processes, functions or programs by any educational institution?			
Yes No			
Are you currently charged or have been convicted or found guilty (even if adjudication with violating any federal or state law or municipal ordinance other than minor offenses involving a fine of \$200 or more?			
Yes No			
I certify that the above information is correct and complete and understand that falsifying or withholding information may result in disciplinary action and withdrawal from the University. I agree to abide by the policies of the Florida Board of Education and the rules and regulations of this University.			
Applicant's Signature [ Please sign your name and date.	Date:		
Ficase sign your name and date.			
Updated on 9/1/2003			

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