



Black Hills State University Dual Enrollment Application Packet

In this document you will find instructions for applying to the dual enrollment program, the application for admission, and the record release form.

1. Complete and make personal copies of all pages in this application packet:
 - Application for Admission
 - Record Release Form
2. Gather and submit the following in **ADDITION** to the application packet:
 - Current high school transcript with cumulative GPA and class rank
 - Composite ACT or SAT score
(If you have not taken the ACT or SAT, the compass exam will be required if enrolling in math and/or English classes. See www.BHSU.edu/DualEnrollment for additional information.)
 - Immunization Records
 - Official university or college transcripts from other institutions attended (if applicable)

Submit to:

Black Hills State University
Office of Admissions
1200 University Street, Unit 9502
Spearfish, SD 57799-9502

(Note: Special arrangements for submission may be arranged with your high school counselor.)

For more information or for questions about dual enrollment contact
605.642.6343 | 1.800.ALL.BHSU | Admissions@BHSU.edu



APPLICATION FOR ADMISSION

Dual Enrollment



Social Security Number _____ - _____ - _____

Legal Name _____

Last

First

Middle

Date of Birth _____ Gender Male Female

Mailing Address

Street Address or Box # _____

City _____

State _____

Zip _____

Home Phone _____

Email Address: _____ Cell Phone _____

Emergency Contact Name _____

Telephone _____ Relationship To You _____

Residency: Have you lived in South Dakota for the past 12 months? Yes No

If you are a South Dakota resident, but you have not lived in South Dakota for the past 12 months, please explain:

Ethnic Group - Section A

Hispanic or Latino (Complete section B if applicable)

Non-Hispanic or Non-Latino (must complete section B)

Ethnic Group - Section B

(Choose all that apply)

American Indian or Alaskan Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Please indicate the location(s) you plan to attend: Spearfish Main Campus BHSU Rapid City Online

Semester and year you wish to enroll: Fall Spring Summer Year: _____

Courses you plan to enroll in: (Consult Dual Enrollment Course Sheet or BHSU website)

Class 1: _____
Course Name Section Time/Day

Class 2: _____
Course Name Section Time/Day

High School from which you will graduate:

Name of School _____

City _____

State _____

Zip _____

To the best of my knowledge, the information provided on this application is true and correct.

Student's Signature _____ Date _____

(Continued on back)

Parent / Guardian Section

Parent / Legal Guardian Name: _____

I understand my personal responsibility to pay Black Hills State University all course tuition and fees associated with Dual Enrollment for the stated applicant.

Parent/Guardian Signature _____ Date _____

High School Guidance Counselor/Principal Section

Name _____ High School _____

Applicant's expected date of high school graduation (MM/YY): ____/____

Has the applicant taken the ACT Test? Yes No Date Tested _____ Composite Score _____

Has the applicant taken the SAT Test? Yes No Date Tested _____ Math _____ Verbal/Critical Reading _____

I understand I need to provide an Official High School Transcript to the BHSU Office of Admissions on behalf of the applicant which includes a list of courses in progress, a cumulative GPA, and his/her class rank.

(Check Box) Initial _____

I have met with the applicant, reviewed this application, and understand the applicant's plans in taking class(es) from BHSU. I also understand the purpose of Dual Enrollment and have explained to the applicant how it may affect his/her high school transcript and graduation requirements.

Guidance Counselor/Principal Signature _____ Date _____

Please mail completed application packet and record release form to:

Black Hills State University
Office of Admissions
1200 University Street, Unit 9502
Spearfish, SD 57799-9502

If you have any questions about Dual Enrollment, please call (605) 642-6343 or 1-800-ALL-BHSU

Use of Social Security Number Privacy Information

We are requesting your SSN for administrative record accuracy and reporting. Disclosure of your SSN is voluntary and if you decline to provide it to us this action will not affect your admissions eligibility. However, we request this information from you in order to meet our federal obligation to report student employment, Hope and Lifetime scholarship tax information, and federal financial aid. The SSN is confidential information under the Federal Educational Rights to Privacy Act and we will not release it without your consent. Having your SSN on record will enable the university to keep accurate information and to report it promptly.

The following information is required for an admission decision:

- Current high school transcript with cumulative GPA and class rank
- ACT/SAT scores (if available)
- Transcripts from other colleges or universities attended (if applicable)

Immunization Records: South Dakota state law requires all students to present proof of immunity to measles, mumps, and rubella (MMR) to enroll in classes.



Black Hills State University

Office of Registration and Records

Record Release Form

Student Name

Last four digits of Social Security Number

The above student has applied for Dual Enrollment at Black Hills State University. By signing below, we authorize BHSU to release academic record information, including but not limited to, grades and enrollment information to the student's High School, School District, and other parties prescribed by the laws of the student's state of residency.

Parent / Guardian Name

Student Signature

Parent / Guardian Signature

Date

Date

FOR OFFICE USE ONLY:

Student ID: _____ High School Name: _____

High School Address:

Street / PO Box

City

State

Zip