Traditional Dual Enrollment Program 2023 & Spring 2024

Deadlines: | May 11 for entry May 22, 2023 | Aug. 24 for entry Sept. 5, 2023 | Jan. 5 for entry Jan.16, 2024

Submit this completed application to admissions@massbay.edu.

Effective January 2022, all Massachusetts community college students, faculty, and staff coming to the campus for classes, activities, or work must be fully vaccinated against COVID-19 and submit verification of their fully vaccinated status to the College, absent an approved reasonable accommodation. In accordance with CDC guidelines* MassBay defines “fully vaccinated” as two weeks after receiving the Johnson & Johnson vaccine or two weeks after receiving the second Pfizer or Moderna dose. For more information about MassBay’s policies please visit: www.massbay.edu/immunization


- Initials of Parent or Guardian: __ I am aware of MassBay’s COVID19 policy Date: ___________
- Initials of Applicant: __ I am aware of MassBay’s COVID19 policy Date: ___________

Traditional Dual Enrollment at Massachusetts Bay Community College (MassBay) allows qualified high school and home school students to enroll in college courses. Participating students may receive college and (with permission from their local school or district) high school credits for their course work. As a Dual Enrollment student, one may register for a full-time or part-time schedule. Traditional Dual Enrollment students pay the standard College tuition and fee rates.

REQUIREMENTS:
1. Candidate must be a Massachusetts resident.
2. Candidate must be enrolled in grade 9 - 12 in a Massachusetts secondary school, including home school.
3. Candidate must submit the Dual Enrollment Application and Agreement.
4. Candidate must have at least a 2.5 cumulative GPA on a 4-point scale.
5. Candidate must meet MassBay placement requirements and place into college level math and/or English courses (100-level math class and EN 101 or higher for English).
6. Candidate must enroll in college-level courses (with course numbers 100 or higher).

ENROLLMENT PROCESS OVERVIEW:
1. Complete and submit MassBay Dual Enrollment Application and Agreement by the published deadline
2. Satisfy the math and English placement requirements (see https://www.massbay.edu/placementtesting)
3. Make an appointment to meet with Luz Castro, Dual Enrollment Coordinator at MassBay | ☏: 508-270-4020 | Fax: 781-239-2508 ✉: lcastro@massbay.edu
   - Review test scores
   - Review College policies
   - Select classes (students must meet appropriate course pre-requisites)
   - Register for class(es)
4. Pay Tuition and Fees
5. Purchase text books
6. Begin Classes (see the College’s academic calendar for start dates)
7. Maintain at least a 2.0 GPA at MassBay.
8. Submit grades to your high school at the end of the semester.

COST:
The tuition and fees rate for qualifying Massachusetts residents who participate in the Traditional Dual Enrollment Program will be charged the standard in-state tuition rate ($224 per credit in 2022-2023). To qualify for in-state tuition, students must a) meet state-established US citizenship requirements, b) have lived in Massachusetts for six months or longer and c) be able to provide two documents from a state-proscribed list establishing intent to remain a Massachusetts resident. Tuition and Fees are subject to change without notice.

Non-Resident Tuition — $430 per credit.
Important Note: Students with medically-documented disabilities are eligible for reasonable accommodations in placement testing and in coursework. Accessibility support services are available through the College's Accessibility Resources Office located in the MassBay Academic Achievement Center. It is important to note that academic accommodations available at the college level differ from those available at the high school level. For additional information regarding the services available call 781-239-2234 or email aac@massbay.edu

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Dual Enrollment Application

Please check the semester you wish you start:

____ Spring _______ Summer _______ Fall

Student’s Biographical Information:

Name: First: __________________ Middle: ________________ Last: _________________________

Date of Birth (MM/DD/YYYY): ______________________ Gender: _________

Country of Birth: ____________________

Social Security Number (Optional): _______________________

REQUIRED State Assigned Student Identifier (SASID): ____________________________________

(Obtain this number from the most recent public school attended)

Address: __________________________________________ Unit/Apt: ___________

City: __________________________ State: _________ Zip: _____________

E-mail Address: ________________________________________________

Cell Phone: _________________________ Home Phone: __________________________

Emergency Contact:

Name: ____________________________________ Relationship to Student: ________________

Phone: ________________________________

Citizenship: Country of Citizenship: ______________________

_____ I am a US Citizen ______ I am a Permanent Resident (USCIS#) ________________

Are you of Hispanic or Latino origin? Yes ____ N0 _____

Regardless of your answer to the prior questions, please select one or more of the following that best describes you:

_____ Asian ______ African American/ Black _____ American Indian or Alaskan Native

_____ Native Hawaiian/Pacific Islander _____ White/Caucasian _______ Other

Is English your first language? Yes ____ No _____ If no, list your Primary Language: ________________

Did your parents graduate from college?

Mother: Yes ____ No _____ Unsure ____ Father: Yes _____ No _____ Unsure _____

Additional Information:

Current High School: __________________________________________ City: ______________

I intend to graduate in __________________________ (Month) __________________ (Year)

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Dual Enrollment Contract

Student Section:
I understand the requirements for the Dual Enrollment Agreement. (admissions to degree and certificate programs requires a high school diploma)
I understand that the Dual Enrollment Agreement is not an application to a degree or certificate program (admissions to degree and certificate programs requires a high school diploma). If I am accepted as a Dual Enrollment student, I agree to adhere to the Student Regulations of the college. It is my responsibility to speak with professors as needed if I have questions or need assistance in a class. I understand that each semester I take classes at MassBay, I must make an appointment with Luz Castro, Dual Enrollment Coordinator at MassBay at lcastro@massbay.edu / 508-270-4020 to select and register for classes. I must also maintain a MassBay GPA of 2.0 or higher to continue taking classes at MassBay. I hereby certify that all information stated on this application is complete and accurate, and I understand the falsification or omission of information may result in disqualification or dismissal. I understand this application for Dual Enrollment will not be complete until all requirements are submitted.

Signature of Applicant: ___________________________________________ Date: __________

Signature of Parent or Guardian: ___________________________________________ Date: __________
(If applicant is under 18)
If student is under the age of 16, an additional consent form will need to be completed and signed

Parent or Guardian Section:
I hereby grant permission for my child to apply to the Dual Enrollment Program at MassBay Community College. Should my child be accepted, I grant permission to enroll in courses at the college. As a participant in the Dual Enrollment Program, my child’s academic records, and placement testing results will be protected by Federal Privacy Laws and will be released only with my child’s consent.

Parent/Guardian Name: ___________________________________________
E-mail: ___________________________________________ Phone: ______________________
Parent/Guardian Signature: _____________________________ Date: __________________

High School Official Section:
I certify that the student named above is a student in good standing at ________________________________ high school with a cumulative grade point average of C or higher and may take courses in the MassBay Dual Enrollment Program to satisfy High School graduation requirements.

Student's SASID number: ______________________________________
High School Official Name: _________________________________ High School Official Title: ______________
E-mail: ___________________________________________ Phone: ______________________
High School Official Signature: _____________________________ Date: __________________

The College adheres to the FERPA (Family Educational Rights and Privacy Act of 1974) which sets forth requirements regarding the privacy of student records. Check our website at www.massbay.edu/registrar for details. A brief summary of FERPA is captured in the following two statements: 1) College students must be permitted to inspect their own educational records. 2) School officials may not disclose personally identifiable information about students, or permit inspection of their records without written permission unless such action is covered by exceptions permitted by the Act.
Consent to Release Education Records

The Family Educational Rights and Privacy Act (FERPA) of 1974 affords certain rights to students concerning the privacy of, and access to, their education records. In compliance with FERPA, MassBay is prohibited from providing certain information from your student records to a third party (including parents, step-parents, spouse, sponsor etc.) such as information on grades, billing, tuition and fees assessment, Financial Aid (including, but not limited to, your grants, scholarships, work study or loan amounts) and other student record information. This restriction applies, but is not limited, to your parents, spouse or sponsors. Students may choose to complete and submit this form to the Registrar allowing the release of their education records to specified third parties. Please note that while this form authorizes MassBay to release education records to third parties, it does not obligate MassBay to do so. MassBay reserves the right to review and respond to requests for release of education records on a case-by-case basis. For additional information, review MassBay Student Handbook at https://www.massbay.edu/handbook or visit the website of U.S. Department of Education at http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html

Full Name of Student (Last, First, Middle) 7- Digit MassBay Student ID

SECTION A. - Education records to be released (check all that apply):

- [ ] All Records Listed Below
- [ ] Academic Information (Grades/GPA, registration, class schedule, courses taken, student ID number, academic progress, enrollment status, demographics, attendance, academic intervention, honors, transfer credits, academic & administrative holds, awards, degrees, residency status, mailing address)
- [ ] Student Account Information (Billing statement, charges, credits, payments, refunds past due amounts, collection activity, debt information, late fees, billing addresses, financial holds, payment plans, tuition & fee balances, communication history, loan distribution)
- [ ] Financial Aid Information (FAFSA Application data, eligibility, awards, disbursements, financial aid Satisfactory Academic Progress status, Loans, Grants, Scholarships, Work study, collection activity)
- [ ] Health Information (Medical notes, physician’s notes, nurse’s notes, personal health information)
- [ ] Student Conduct Information (Student misconduct incident reports, academic dishonesty reports, Hearings & hearing results)
- [ ] Parking & Campus Card Services (including parking citations, ID card, one-card balance, photo)
- [ ] Other (Please specify)

SECTION B. – Person(s) permitted to have access to your education records:

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SECTION C. - Certification: This form must be submitted in-person by the student with their MassBay ID or a valid government issued Photo-ID.

Note: Student may submit this form to Registrar@massbay.edu from their MassBay email address only. Third- party person(s) receiving access must provide a copy of a valid government issued Photo-ID.

I understand that (1) I have the right not to consent to the release of my education records, (2) I have the right to inspect any written records released pursuant to this Consent, and (3) this authorization will remain in effect unless I revoke such consent by emailing the Registrar’s office at Registrar@massbay.edu, and the revocation is received and processed by Office of the Registrar at MassBay.

Student’s MassBay Email: ________________________ Student’s Signature: ________________________

Today’s Date: ________________________

Revised 10/8/2020