



# Dual Enrollment On-Campus Course Registration

Dual Enrollment students requesting to take courses at Keystone College either on-campus or on-line should submit this completed form to the Registrar's Office prior to the first day of classes for the semester.

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Please Print: First Mid Init Last

Male  Female Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email\*: \_\_\_\_\_

Please Print Clearly

\*You will receive notification of your Keystone College network credentials to this email address 30 days prior to the start of classes.

School District: \_\_\_\_\_

Anticipated High School Graduation Date: \_\_\_\_\_

Are you interested in pursuing a degree at Keystone College?  Yes  No Intended Major: \_\_\_\_\_

Please indicate below your choice of courses (Course options may be obtained at [www.keystone.edu/high-school-programs](http://www.keystone.edu/high-school-programs)):

Course Number	Section	Course Title	Credits **	Semester/Term

\*\*Please note that high school students are able to register for up to 24 credits before making formal application to the College.

Please describe any special circumstances the College should be aware of regarding classroom access or course instruction on a separate sheet of paper to submit with this form. Appropriate documentation must be received by the College at least two (2) weeks prior to the start of your intended term.

I understand that I am solely responsible for all charges and fees resulting from registration for the course(s) above. I am aware that the refund schedule for these charges and fees is available at <https://www.keystone.edu/admissions/tuition-aid/refunds-and-withdrawals/>. For the 2022-2023 academic year, on-campus/on-line dual enrollment courses will be charged at the rate of \$100/credit.

I understand that I may be subject to disciplinary action, including admission revocation or expulsion or denial of future admission, should the information I certified above be false.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guidance Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY

Date Received Initials Date Processed  
Registrar's Office ■ One College Green ■ P.O. Box 50 ■ La Plume, PA 18440-0200 ■ (570) 945-8300 ■ [registrar@keystone.edu](mailto:registrar@keystone.edu)

Keystone College is committed to providing equal educational and employment opportunities without regard to an individual's sex, race, religion, national or ethnic origin, pregnancy, age, marital status, sexual orientation, disability, or status as a veteran. Keystone College's commitment is to provide an environment where all students and employees can work and study free from discrimination including sexual harassment, sexual violence and sexual assault. The College policy is in accordance with state and federal laws and executive orders including but not limited to: Title VI, VII of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, and the Americans with Disabilities Act of 1990. Visit [www.keystone.edu/title-ix](http://www.keystone.edu/title-ix) for additional information.