

Augustana College

College in Schools

Course Registration Form

Augustana College encourages talented high school students to supplement their school curriculum with college course work. In addition to providing a challenging academic experience, the College in Schools program allows high school juniors and seniors the opportunity to acquire transcribed college credit. Courses taken by high school students regularly include Calculus II, Intro to Government, General Psychology, and Western Civilization to name a few.

NOTE: Check with your high school counselor if you plan to use college credit for a high school graduation requirement or scholarship qualification. You are encouraged to determine the necessary procedures required by your high school before completing this form.

Eligibility Requirements

- Successful completion of sophomore year in high school
- Minimum cumulative grade point average of 3.30 as documented on high school transcript
- Parental permission and signature
- High school principal or counselor signature

Procedure for Registration

- Complete the Course Registration Form and submit it either electronically or by mail to the Augustana Office of Admission.
- Request an official copy of your high school transcript and send it to the Augustana College Office of Admission.
- Ready to register? Call the Office of Admission to arrange an appointment.
- **COURSE SELECTION IS BASED ON AVAILABILITY OF SPACE IN CLASS**

Questions? Call Adam Heinitz, Director of Admission, at 274-5529



2001 SOUTH SUMMIT AVENUE
SIOUX FALLS, SOUTH DAKOTA 57197

Augustana College - College in Schools Registration Form

Full Name: _____
(Last) (First) (Middle) (Maiden)

Address: _____
(Street, PO Box and/or Rural Route)

_____ Home Phone: _____
(City) (State) (Zip Code)

E-mail Address: _____

Date of Birth: ____/____/____ Place of Birth (city, state): _____

Social Security Number: _____ - _____ - _____ Gender: Male Female

High School: _____ Expected Graduation Date: _____

I am registering for class during:

Fall Spring Interim Summer of 20____ (Year)

Course Name & Number _____

Have you earned any previous credit from Augustana? Yes No

If Yes, When? _____

Have you applied or do you plan to apply for admission to Augustana? Yes No

Required Signatures

Student: _____

Parent/Guardian: _____

High School Counselor, Principal: _____ Date: ____/____/____

Office of Admission: _____ Date: ____/____/____

Approved: _____

For Office Use Only

Augustana ID Number: _____ Parking Pass Completed: _____

Augustana E-mail Address: _____

Augustana Password: _____