Triton College
Application for Dual Credit Enrollment
2000 Fifth Ave. River Grove, IL 60171 (708) 456-0300, Ext. 3612

1. Contact Information: Date:_____

Last name | First Name | Middle Name or Initial

Street address

City | State | Zip | Birth date (month/day/year)

( ) ( )

Primary phone | Alternate phone | E-mail address

2 High School: _____ **3** Gender: _____ Male _____ Female

4. Anticipated High School Graduation Month/Year: _____

5. Citizenship (check only one):
____ U.S. citizen (born or naturalized)
____ U.S. permanent resident: Country of origin: _____
Alien registration number:_____
____ International: Country of origin:_____
Visa category:_____
____ Adjustment in status (submitted application for permanent residency)
____ Non-citizen: status identified. Check this option if you can answer "yes to all the following questions:
Did/will you graduate from an Illinois high school or attain a GED in Illinois?
Did/will you attend a school in Illinois for at least 3 years during K-12?
Did/will you live with your parents while you attended school in Illinois?
____ Non-citizen (Other categories do not apply to you)

6. My primary reason for enrolling in Triton College Dual Credit is:
____ 1. To prepare for a future job.
____ 2. To improve skills needed in present job.
____ 3. To explore courses that will help in making a career decision.
____ 4. To complete course work in preparation for transfer
____ 5. To remedy or review basic educational or vocational skills.
____ 6. For personal interest or self development.
____ 7. To prepare for the GED.
____ 8. Other or unknown.

7. What is the highest level of education attained by your:

Mother	Father
___ some high school	___ some high school
___ high school graduate	___ high school graduate
___ some college	___ some college
___ bachelor's degree	___ bachelor's degree
___ master's or higher	___ master's or higher

8. My current employment status is:
___ 1. employed full-time
___ 2. employed part-time (more than 15 hrs./wk.)
___ 3. employed part-time (15 hrs./wk. or less)
___ 4. homemaker
___ 5. unemployed
___ 6. other
___ 7. no response

9. **NOTE:** This information is requested solely for the purpose of determining compliance with federal civil rights law, and your response will not affect consideration of your application. By providing this information, you will assist us in assuring that this program is administered in a non-discriminatory manner.
Are you Hispanic or Latino? **____ Yes ____ No**

Are you from one or more of the following racial groups? (check all that apply)
____ American Indian/Alaskan Native
____ African American/Black
____ Asian
____ Native Hawaiian/Pacific Islander
____ White
____ no response

Primary racial/ethnic group: (check one)
____ American Indian/Alaskan Native
____ African American/Black
____ Asian
____ Native Hawaiian/Pacific Islander
____ White
____ no response

I, the parent/guardian of _____, request his/her SAT/ACT scores be sent to Triton College for admission.
Student Name

_____ _____
Signature of Parent/Guardian | Signature of High School Counselor/Principal

SAT or ACT Test Date: _____ (Specify test) English _____ Math_____ Science _____ Comp _____ School Registrar_____ Date ____/____/____	Placement Test Requirement _____ Satisfied _____ Not Satisfied Date____/____/____ Triton Staff _____

Revised 4/29/19