

Steps to Complete Your ECC Dual Credit Application:

Students can access the Elgin Community College Dual Credit application at <https://apps.elgin.edu/DualCredit/DualCreditForm.aspx>. Please note, the Dual Credit application is different from the general online ECC application and should appear as below.

Detailed explanations of the steps required to complete the application, can be found here:

 Dual Credit Application Instructions 25/26

Dual Credit Online Application Form

This application is for Dual Credit students ONLY. You must be a current high school student to apply using this form.

If you are unsure if you should use the Dual Credit Application, please email dualcredit@elgin.edu or call 847-214-7887.

If you are not a Dual Credit student, please select a different application on the Apply page:

- [ECC Application](#) - If you are a traditional student
- [International Students](#) - If you plan to study in the United States on an F-1 visa
- [Adult Education](#) - If you are interested in high school equivalency/GED or English as a Second Language classes

Your Contact Information

Important: Please ensure all personal information is entered accurately and completely. Any incorrect details or typographical errors may cause delays in the enrollment and registration process.

* First Name:	Middle Initial:	* Last Name:
Legal First Name		Legal Last Name
Preferred First Name:	Preferred Middle Initial:	* Date of Birth:
Preferred First Name	Preferred Middle Initial	mm/dd/yyyy
SSN or ITIN: ?	* Email: ?	* Primary phone:
999-99-9999		(999) 999-9999
Use a personal email address not your high school email address.		
* Street: (Example: 123 Maple Street, Apt 3)	* ZIP:	* City:
	Enter 5 digit ZIP code	
		* State:
		Example: IL

*** Are you in the United States on a Non-Immigrant Visa? ?**

☐ Yes ☐ No

Notes:

- All applications must be completed and submitted at the same time. Progress will not be saved if applications are not submitted.
- Only areas marked * are required.
- Please be sure to enter your name correctly. Names entered with errors will need to be corrected with ECC's Registration office.
- Enter your personal email, and not a parent or guardian's.
- Social Security Number (SSN) or ITIN are optional.
- Non-Immigrant Visa- If you currently have a F-1 (student), J-1 (exchange visitor), H-4 (dependent of a temporary worker), or B-2 (tourist) visas, choose "Yes." If you are a U.S. citizen, permanent resident, DACA recipient, or do not have a U.S. visa, choose "No".

Your Profile

* Sex: ☐ Female ☐ Male

Personal Pronouns:

Pick one--

Gender Identity:

Pick one--

ECC provides services and resources to support students who experience any of the challenges listed below. Your answers to the questions will not impact your admission to the college.

* Are you a parent?

☐ Yes ☐ No ☐ Choose not to respond

* Are you an out-of-workforce individual? (I have worked in the past but am currently unemployed.) ?

☐ Yes ☐ No ☐ Choose not to respond

* Are you now or have you ever been in the Department of Children and Family Services (DCFS)/foster care system?

☐ Yes ☐ No ☐ Choose not to respond

* Are you homeless? (I do not have a regular nighttime residence.)

☐ Yes ☐ No ☐ Choose not to respond

Are you a military veteran?

☐ Yes ☐ No

Are you currently active in the military?

☐ Yes ☐ No

* Primary language spoken at home:

Pick one--

* Are you Hispanic or Latino? (or are you of Spanish origin?):

Pick one--

* Select all racial groups that apply:

☐ American/Alaska Native
☐ Asian
☐ Black or African American
☐ Hawaiian/Pacific Islander
☐ Hispanic or Latino
☐ Middle Eastern and North African.
☐ White
☐ Choose not to respond

* Did either of your parents attend college?

Pick one--

* Do you have a parent who is a member of the armed forces and on active duty?

☐ Yes ☐ No ☐ Choose not to respond

- An out-of-workforce individual is not a high school student, but rather is a person who no longer has access to previous financial support and finds they need to attend college to seek training to obtain a high-paying, high-demand job

Your Academics/Credentials	
* High School Pick one--	* What high school grade will you be when you start taking Dual Credit classes? Pick one--
* Anticipated high school graduation year: yyyy	* High School ID Number

Your Enrollment	
* What is your primary ECC Academic Goal? ☐ Full-Time at ECC starting Junior year Take classes full-time at ECC to graduate with my high school diploma and an Associate degree at the same time ☐ Full-Time at ECC starting Senior year Take classes full-time at ECC to receive my high school diploma and obtain some college credits to transfer to ECC or another college/university after graduation ☐ Part-time at ECC Take some classes at my high school and some at ECC to complete my high school diploma and obtain some college credits to transfer to ECC or another college/university after graduation ☐ Dual Credit in the High School Complete my high school diploma while taking college level courses only at my high school	* Intended start term: Pick one-- * Reason for Enrollment: ☐ To give me a head start on earning credits before I attend ECC ☐ To transfer credits to a four-year college or university or to another community college after HS graduation ☐ To prepare for a future job after graduating from high school ☐ To help me prepare for the rigors of going to college full time Plan to work while attending ECC (hours per week):

- Be sure to accurately enter your high school student ID number (include example) to allow your high school to monitor your status in the application cycle
- Enrollment- Choose your top program of interest. Note: Full-Time program admission decisions are made in early March

Other Contacts			
* Parent/Guardian First Name:	* Parent/Guardian Last Name:	* Parent/Guardian Relationship:	
Legal First Name	Legal Last Name	Pick one--	
* Parent/Guardian Primary Phone:	Parent/Guardian Email:		
(999) 999-9999			
☐ Same as student address	* Parent/Guardian ZIP:	* Parent/Guardian City:	* Parent/Guardian State:
* Parent/Guardian Street:	Enter 5 digit ZIP code		Example: IL
	* Emergency Contact Relationship:	* Emergency Contact Phone Number:	
	Pick one--	(999) 999-9999	

Authorization

I understand my Dual credit Courses and grades will become part of my permanent ECC transcript.

I understand that I may need to take tests or submit scores from standardized tests before I will be registered into certain courses.

I understand that if I stop attending a course or want to avoid a poor final grade on my college transcript, I need to formally withdraw from the course before the withdrawal deadline.

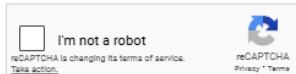
* Applicant Signature:

I hereby certify that the information furnished herein is true and complete to the best of my knowledge. I understand that inaccuracies and/or false information will be cause for rejection or dismissal.

Parent/Legal Guardian Signature:

If the student is under 18, parent/guardian must consent to the above by entering their name.

* Please read through the content and scroll to the bottom to click the box acknowledging you have read the information. [Terms and Conditions](#) and [Privacy Policy](#).



- **Your application is not complete until you click on Submit**
- The Verify Information button will show you any missing information, but does **not** finalize your application submission

Note- The application process may be revised slightly. Students are encouraged to connect with their high school counselor for assistance.