



CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

Early/Dual Enrollment Program Application (Part II)

- 1. This form must be submitted to the Office of Academic Programs (EDUC 242) with the CSUB Program Application Part I, high school transcripts, test scores, and a non-refundable fee of \$36.00 (cash or check).
2. Admission to the University must be recommended and approved by the principal and/or director of guidance of the high school, and by the student's parents or legal guardian.
3. The student's preparation should be such that in the judgement of the appropriate authority, the probability of the student's academic success at the campus is equivalent to that of students admitted under current CSU admission requirements.
4. Normally, the student will be allowed to enroll for no more than one course per semester. A new form must be submitted to the Office of Academic Programs for each additional semester of enrollment.
5. Unit and content credit with appropriate grades earned will be established for each student and will be available for use toward meeting graduation requirements at the University, or for transfer to another college or university.
6. Admission to the Early Enrollment Program does not constitute regular admission to the University once the student has graduated from high school. If a student wishes to continue enrollment at the University after graduation from high school they must submit a regular CSU admissions application, pay the application fee, and meet the CSU admission requirements in effect at that time.

DISTRICT HIGH SCHOOL AUTHORIZATION

It is recommended that _____ be permitted to
Print Student's Name

enroll in _____ at California State University, Bakersfield,
Course Name and Number (1000 or 2000 level ONLY)

_____ during _____ semester. GPA _____
CRN #(s) Fall / Spring / Summer and Year 9-12 WT

My authorization indicates that this student is a junior or senior whose grade point average and test scores indicate that minimum State University entrance requirements should be met at the time of graduation from high school.

School's Authorization: I hereby certify that I approve the indicated enrollment and verify that the student will be a high school junior or senior at the time of the above enrollment.

High School

Asst. Principal, Guidance Director, or Counselor

IMMUNIZATION CERTIFICATION

By initialing, I further certify that the above student has current proof of measles & rubella immunizations on file.

High School Representative

PARENT/GUARDIAN AUTHORIZATION

I understand that these classes are college-level and that the grades will show up on my son's/daughter's permanent academic transcript. I further understand that my son/daughter will be required to meet all of the study requirements as called for on the course syllabus and is subject to all the attendance, drops and withdrawal, academic, and code of conduct regulations and policies as outlined in the California State University Bakersfield (CSUB) Catalog. Failure to maintain good academic standing of a 2.0 or above will prevent a high school student from enrolling in further classes at CSUB.

Student's Social Security Number or CSUB ID

Print Parent/Guardian Name

Parent/Guardian's Signature

Date Signed