



District Office of Admissions/Records
1000 College Blvd; Pensacola FL 32504

The Dual Enrollment Program is a unique learning opportunity for eligible high school students who wish to accelerate their educational goals.

Please print all information in blue or black ink. Date of Birth _____
Month/Day/Year

Student Social Security Number _____ Last Name _____ First _____ Middle _____
See the SSN Collection/Usage Statement attached Print your legal name as it appears on your birth certificate

Mailing Address _____ City _____ State _____ Zip _____ Email address _____
@students.pensacolastate.edu

Primary Telephone Number _____ Secondary Telephone Number _____

Check the term you plan to begin: [] Fall (August-December) [] Spring (January-May) [] Summer (May-August)

CITIZENSHIP INFORMATION*
Are you a citizen of the United States? [] Yes [] No
If you are not a U. S. citizen, answer the following:
Country of Citizenship _____
Are you a permanent resident alien? [] Yes [] No
If yes, what is your resident alien number? _____
If no, indicate current status:
Visa Type _____ Visa Expiration Date _____
[] Check here if you are an undocumented alien. Pensacola State College permits the enrollment of undocumented aliens.

GENDER AND ETHNICITY*
Gender and ethnicity information is requested to aid in Florida's commitment to Equal Access/Equal Opportunity and to meet federal reporting requirements. Responses are not used in the admissions process.
Gender [] Male [] Female
Ethnicity Are you Hispanic [] Yes [] No
Check all that apply: [] White [] Black or African American [] Asian [] Native Hawaiian or Pacific Islander [] American Native/Alaskan Native

HIGH SCHOOL INFORMATION

Name of School _____

Highest Grade Level Completed _____ Anticipated Graduation Date _____

I certify that the information provided on this application form is true and accurate. I agree to abide by the rules and regulations established by the State Board of Education and Pensacola State College. I understand that all classes attempted are credit courses, and the courses and grades earned will appear on an official transcript permanently. I have been provided the Social Security Number Collection/Usage Statement and know that it is my responsibility to provide this statement to my parent(s)/guardian(s). I have informed my parent(s)/guardian(s) of my participation in the Dual Enrollment Program at Pensacola State College, and my participation authorizes the College to release information to my high school regarding attendance, academic progress, grades earned, etc.

DATE _____ STUDENT SIGNATURE _____

Notification of Social Security Number Collection and Use

In compliance with Section 119.071(5), Florida Statutes, Pensacola State College issues this notification regarding the purpose for the collection and use of your Social Security Number (SSN). Pensacola State College collects and uses your SSN only to perform the College's duties and responsibilities. To protect your identity, Pensacola State will maintain the privacy of your SSN and never release it to unauthorized parties in compliance with state and federal laws. The College assigns you a unique student identification number which is used for associated educational purposes at Pensacola State, including the access of your student records.

Pensacola State College may collect and/or use your Social Security Number for the following purposes:	FEDERAL AND STATE REGULATIONS
<ul style="list-style-type: none"> • Federal legislations relating to the Hope Tax Credit requires that all postsecondary institutions report student SSNs to the Internal Revenue Service (IRS). This IRS requirement makes it necessary for Pensacola State to collect the SSN of every student. A student may refuse to disclose his/her SSN for this purpose, but he/she may be subject to IRS penalties. • The Florida public school system uses the SSN as a student identifier. It is beneficial to have access to the same information for purposes of tracking and assisting students in the transition from one educational level to the next, linking all levels of the state education system. The intent is to establish a comprehensive management database of information which will co-reside with the Division of Public Schools Information Database and the State University System Database to provide integrated information of the state level for educational decision-making. • SSNs appear on official transcripts and are used for business purposes in accordance with parameters outlined by the United States Department of Education. 	<p>Tracking uses are authorized by SBE Rule 6A-10955(3)(c), 1008.386 FS, and the General Education Provisions Act 20 USC 1221 (e-1).</p> <p>Hope/Lifetime Tax Credit uses are authorized by 26 USC 6060S and Federal Register, June 16, 2000, IRC Section 25A.</p> <p>Registration uses are authorized by 119.071(5) FS.</p> <p>Issuance of Form 1098T for tuition payment reports is authorized by 26 USC 3402.6051.</p> <p>The College Reach-Out Program (CROP) uses are authorized by 1007.34 FS.</p>