



# EC and HCC DUAL Admission Course Registration Form



I wish to enroll in a course at Elizabethtown College that is required for completion of the Elizabethtown College bachelor’s degree and not offered by Harford Area Community College. **Students are responsible for notifying the appropriate office on BOTH campuses if you elect to withdraw from a course(s).**

Name: \_\_\_\_\_ Last 4 SSN: \_\_\_\_\_  
Last First Middle

Legal Permanent Address Information:

\_\_\_\_\_ Student ID: \_\_\_\_\_  
Address 1  
\_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_  
Address 2  
\_\_\_\_\_ City State Zip

Email Address: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Intended Major at Elizabethtown: \_\_\_\_\_

Term: fall \_\_\_ spring \_\_\_ summer \_\_\_ Year: \_\_\_\_\_

Course (e.g. AC 101): \_\_\_\_\_ Course Credits: \_\_\_\_\_ Section letter: \_\_\_\_\_

Course Title: \_\_\_\_\_

Course Equivalent at Home Institution: \_\_\_\_\_ Course Credits: \_\_\_\_\_  
(Assigned by Advisor/Administrator)

Course Title: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**REQUIRED APPROVALS:** The above student is in good academic standing. The above student is a member of the HCC/Elizabethtown College Dual Admission Program. The student has met all pre-requisites, co-requisites required for enrollment into the above course.

Counselor/Academic Advisor Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

EC Admissions Transfer Coordinator: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

EC Registrar Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Please scan and send to [regandrec@etown.edu](mailto:regandrec@etown.edu) for processing and coordination of the course registration.

Admissions

Registration

Business Office