



WVSU at GWHS College Course Application

Completed applications should be taken to the main office.

Student Information

Full Name: _____ Birth Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

Social Security Number: _____ Gender: _____ Grade: _____

Requested Courses: _____

Is this your first college course? YES NO If No, list all that you have completed.

I understand that I am registering for a college course and the grade will be recorded on my college transcript. I understand that I will be responsible to communicate with my college professor and counselor if I experience issues. I also understand attendance in a college course is necessary and will be part of the grade.

Student Signature: _____ Date: _____

I understand that my child is registering for a college course through WVSU. The cost for a 3-hour class is \$75 and will be billed by WVSU via mail to the address on this form. I understand that the grade from this course will be on my child's college transcript.

Parent Signature: _____ Date: _____