

# **Houston Community College**

## DUAL CREDIT WAIVER APPROVAL FORM

Last Name A.	First Name	HCC Student ID
Frenesis Chustian &	in a l	1100 214441112
Name of High School / District	Current Grade	HS Graduation Date (MM/YYY)
This form is valid for the duration of the stude Student enrollment is contingent on qualifica		ECHS/PTECH/Homeschool High School Program. rs.
Beginning Fall Ending Semester Semester	Academic Program	Academic Degree
The Academic Program is subject to change to decides to change their Academic Program, t		cademic progression and interest. If a student laiver Approval Form.
The P-16 office should be notified immediate longer be valid. Students transferring to a ne		m the dual credit program as the form will no
	ce and background to all students enr	oout course, program and degree requirements for olled at HCC, prospective students, and alumni [credit bearing courses only].
Students and Parents please read the st	atements below:	
with taking dual credit course(s) unless of a lunderstand that the student must have credit course.  I understand that Academic Freedom all understand that once the student is refamily Educational Rights and Privacy Academic Highest Academic Standard Code of Conduct, policies, academic Standard	otherwise stated by high school.  e written permission from the high school of the wild will be and students to pursue releval gistered in a college course, he/she contropt (FERPA) and—unless an exception applied to the student as a dependent of conduct is required. It is my responsible adards of HCC, and standards set forth in the	tbooks, supplies, or instructional software) associated counselor before he/she can withdraw from a dual nt course content that may be adult in nature. It is access to his or her educational records under the es—I may not have access to my student's records dent on my most recent income tax return. Dility to comply with the admission policies, student the course syllabus.
take the initiative in my education.	re assessed based on a student's home add	dress. Students may be required to pay the fee, or the
My signature below acknowledges that I have		ove and give my child permission to enroll in the Dual ion of their high school career.
Student Signature	Date:	
Parent/Guardian Signature	Date:	

6.7- hors



## Houston Community College Dual Credit Course Recommendation for Freshmen and Sophomores

Due to the implementation of HB 505, freshman and sophomore high school students are now eligible to take dual credit classes, as long as they meet the college readiness criteria.

Freshmen and sophomores wishing to enroll in dual credit courses must have principal or counselor recommendation to take a dual credit course. In addition, HCC recommends that these students be limited to the following course options:

**ARTS 1311** 

**BCIS 1405** 

**CDEC 1313** 

**DRAM 1310** 

**EDUC 1300** 

**ENVR 1301** 

Any Foreign Language at the 1411 level

SPAN 2313 and 2315 (For Native Spanish Speakers)

**GEOL 13030** 

ITSC 1309

Math 1314, Math 1332, Math 1324, or Math 1342

**PHED 1304** 

PHED 1111-Aerobic Conditioning

PHED 1158 -Yoga

PHED 2111 - Weight Training & Conditioning

PHED 2113 -Individualized Fitness Training

POFI 1301

**POFI 1341** 

SOCI 1301 (For Sophomores Only)

Note: Students working toward a Level 1 Certificate may take the appropriate first semester courses for that particular certificate program..

#### Meningitis Vaccination Information

Texas Senate Bill 1107, passed in May 2011, requires embedded or online dual credit students to present a physician-signed certificate showing they have been vaccinated against bacterial meningitis.

The immunization must have been received with in the last five years and valid throughout the entire semester the student is enrolled in, or be administered at least 10 calendar days before the start date of the session in which the student is enrolling in.

All students are encouraged to consult with a physician about the need for immunization to prevent this disease.

## Required Documentation:

- Vaccination Record/documentation must be in English, include student's full name and date of birth on each page submitted. Write HCC Student ID on each page you submit. Submit your documentation along with the HCC Meningitis Vaccination Verification Form.
- An official immunization record generated from a state or local health authority. Documentation must be in English and submitted with the HCC Meningitis Vaccination Verification Form.
- An official record received from school officials, including a record from another state and submitted with the HCC Meningitis Vaccination Verification Form.
- Affidavit or a certificate signed by a physician who is licensed to practice medicine in the United States which states that in the physician's opinion the medinaccoccal vaccine would be injurious to student's health and well-being. Documentation must be in English and submitted with the HCC Meningitis Vaccination Verification Form.
- A completed Exemption from Meningococcal Vaccination Requirements for Reasons of Conscience Form available online at <a href="https://core.uestjc.dshs.texas.gov/">https://core.uestjc.dshs.texas.gov/</a>. Documentation must be submitted with the HCC Meningitis Vaccination Verification Form.

## Examples of acceptable vaccine entry on vaccination/immunization records:

- Meningococcal A, C, Y & W-135
- Meningococcal A, C, Y & W
- MCV4
- Meningococcal Conjugate
- Menactra
- Menveo
- MCSV4
- Meningococcal Polysaccharide
- MPSV4
- Menomune
- Meningococcal (If vaccine was given in the United States)
- Meningitis (If vaccine was given in the United States)
- MNG (If vaccine was given in the United States)
- Meningo
- MCV4P

## Examples of unacceptable vaccines, for State college/university mandate requirement:

- Meningitis B
- MVC #B
- MenB
- MenB FHbp
- Men B 4C



# **Bacterial Meningitis Vaccination Verification Form**

Date of Birth  Daytime phone #  Email address  I am submitting meningitis immunization documentation as required  I am submitting Medical Exemption affidavit or certificate (Signed statement by physician stating that the vaccine poses a significant risk to your health. Unless statement indicates permanent condition, the exemption statement is valid for only one year from the date signe by the physician)  I am submitting an Affidavit for Exemption from Immunization for Bacterial Meningitis for Re of Conscience.  VERIFICATION FORM & DOCUMENTATION MAY BE SUBMITTED:  AT ANY CAMPUS  BY EMAIL: Scan your documentation and attach it to an email sent to vaccine@hccs.edu  BY FAX: 713/718-2882  BY U.S. MAIL:  Houston Community College Admissions & Records, P.O. Box 667517 Houston, Texas 77266-7517  I have read and understand the Bacterial Meningitis immunization requirement. I certify that the information I have provided is true and correct.	Last Name		First Name	HCC Student ID Number
I am submitting Medical Exemption affidavit or certificate (Signed statement by physician stating that the vaccine poses a significant risk to your health. Unless statement indicates permanent condition, the exemption statement is valid for only one year from the date signe by the physician)  I am submitting an Affidavit for Exemption from Immunization for Bacterial Meningitis for Re of Conscience.  VERIFICATION FORM & DOCUMENTATION MAY BE SUBMITTED:  AT ANY CAMPUS  BY EMAIL: Scan your documentation and attach it to an email sent to vaccine@hccs.edu  BY FAX: 713/718-2882  BY U.S. MAIL:  Houston Community College Admissions & Records, P.O. Box 667517 Houston, Texas 77266-7517	Date of Birth		Daytime phone #	Email address
stating that the vaccine poses a significant risk to your health. Unless statement indicates permanent condition, the exemption statement is valid for only one year from the date signe by the physician)  I am submitting an Affidavit for Exemption from Immunization for Bacterial Meningitis for Reof Conscience.  VERIFICATION FORM & DOCUMENTATION MAY BE SUBMITTED:  AT ANY CAMPUS  BY EMAIL: Scan your documentation and attach it to an email sent to vaccine@hccs.edu  BY FAX: 713/718-2882  BY U.S. MAIL:  Houston Community College Admissions & Records, P.O. Box 667517 Houston, Texas 77266-7517	l am sı	ıbmitting meningi	tis immunization documentation a	as required
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	information I	have provided is t	rue and correct.	
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#### HOUSTON COMMUNITY COLLEGE-SOUTHEAST COLLEGE ASSOCIATE DEGREE ADVISING PLAN

Student Name	Major
Student I.D.	Transfer Institution

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CORE	AND PERMITTEN CASCANDES IN A COMPANY OF THE PROPERTY OF THE PR
COMMUNICATION	ENGL 1301, 1302
(choose two) (010)	
LANGUAGE, PHILOSOPHY &	ENGL 2322, 2323, 2327, 2328, 2332, 2333,2341, 2351; HIST 2311, 2312; HUMA 2319;
CULTURE	PHIL 1301,1304, 2306, 2307, 2316, 2317
(choose one) (040)	
MATHEMATICS	MATH 1314, 1316, 1324, 1325, 1332, 1342, 1350, 1442, 2318, 2320, 2412, 2413; PSYC 2317
(choose one) (020)	
LIFE & PHYSICAL SCIENCE	ANTH 2301; ASTR 1303, 1304, 1403, 1404; BIOL 1306 & 1106, 1308, 1309, 1322, 1407, 1411, 1413, 2301
LAB OPTIONAL	& 2101, 2302 & 2102, 2406, 2416, 2320 & 2120, 2428; CHEM 1305 & 1105, 1311 & 1111, 1412, 1413,
(choose two)	1414, 2423, 2425; GEOG 1301; GEOL 1305, 1345, 1347, 1401, 1402, 1403, 1404; PHYS 1305, 1307,
(030)	1401, 1402, 2325 & 2125, 2326 & 2126
CREATIVE ARTS	ARTS 1301, 1303, 1304; DANC 2303; DRAM 1310, 2361, 2366; HUMA 1301; MUSI 1301, 1306, 1310
(choose one) (050)	
AMERICAN HISTORY	HIST 1301, 1302, 2301, 2328, OR 2381
(choose two) (060)	
GOVERNMENT	GOVT 2305, 2306
(choose two) (070)	
SOCIAL/BEHAVIORAL/	ANTH 2346, 2351; ECON 2301, 2302; GEOG 1302, 1303; PSYC 2301; SOCI 1301, 1306, 2301, 2336
SCIENCE	#
(choose one) (080)	ANTITY CLOSE COOK COOK COOK AND
COMPONENT AREA OPTION	ANTH 2101, 2301, 2302, 2346, 2351; ARAB 1411, 1412; ARTS 1301, 1303, 1304; ASTR 1303, 1304, 1403,
(choose two)	1404; BIOL 1306 & 1106, 1308, 1309, 1322, 1407, 1411, 1413, 2301 & 2101, 2302 & 2102, 2406, 2416,
	2320 & 2120, 2428; CHEM 1305 & 1105, 1311 & 1111, 1412, 1413, 1414, 2423, 2425; CHIN 1411, 1412; COMM 1307; COSC 1436; DANC 2303; DRAM 1310, 1351, 2361, 2366; ECON 2301, 2302; EDUC 1300;
	ENGL 2307, 2308, 2311, 2322, 2323, 2327, 2328, 2332, 2333, 2341, 2351; FREN 1411, 1412; GEOG
	1301, 1302, 1303; GEOL 1305, 1345, 1347, 1403, 1404; GERM 1411, 1412; HIST 1301, 1302, 2301, 2311.
	2312, 2328, 2381; HUMA 1301, 2319; JAPN 1411, 1412; KINE 1304, 1306; KORE 1411, 1412; MATH
1.1	1314, 1316, 1324, 1325, 1332, 1342, 1350, 1351, 1442, 2318, 2320, 2412, 2413, 2414, 2415; MUSI 1301,
(090)	1306, 1310; PHIL 1301,1304, 2303, 2306, 2307, 2316, 2317; PHYS 1401, 1402, 2325 & 2125, 2326 &
	2126; PSYC 2301; SOCI 1301, 1306, 2301, 2336; SPAN 1411, 1412; SPCH 1311, 1315, 1318; 1321; VIET
	1411,1412
ADDITIONAL REQUIRE	MENTS

		Name and Address of the Owner, where the Owner,		STATE OF THE PROPERTY OF THE P
ASSOCIATE OF A	RTS	AS	SSOCIATE OF SCI	ENCE
choose 18 semester hours *See note below regarding electives.	1	M C (c A L S S	DDITIONAL  AATHEMATICS CORE  Choose two)  DDITIONAL  IFE & PHYSICAL  CIENCE CORE  AB REQUIRED  Choose one)	MATH 1314, 1316, 1324, 1325, 1332, 1342, 1350, 1442, 2318, 2320, 2412, 2413; PSYC 2331, 2
	7.	8	LECTIVES: choose semester hours See note below garding electives.	1 2 3

\*TO DETERMINE ELECTIVES, YOU SHOULD USE THE 4 YEAR CURRICULUM IN YOUR DECLARED MAJOR WHERE YOU PLAN TO TRANSFER. IF THERE ARE COURSES ON THAT PLAN THAT ARE AVAILABLE AT HCC, YOU MAY CHOOSE TO TAKE THEM AS YOUR ELECTIVES. NO ONE COURSE MAY BE USED TO FULFILL MORE THAN ONE SUBJECT AREA.

STUDENT SUCCESS COURSE - Required 1st Semester if student has completed or transferred in less than 12 college level credit hours: EDUC 1300 Check catalog for course prerequisites, co-requisites, course restrictions, and/or equivalencies.

Specific transfer plans are available for most universities. See counselor for more information. The student must earn a minimum 2.0 GPA on sixty (60) total college-level semester hours, must complete a minimum eighteen (18) hours of coursework in the Houston Community College System, and have an application to graduate on file in the Registrar's office in order to graduate.