SPECIAL ADMISSION FORM
Please print, sign, and submit form with Application for Admission to ECC-Union.

To be completed by students under age 17 who wish to take credit classes before earning a high school diploma, a GED certificate or a home school certificate. Secondary students enrolled in Dual Credit classes at the high school campus are exempt from this requirement.

Student’s Name __________________________________________________________

Social Security Number       Date of Birth ____________________
or Student ID Number ________________________

Name of school currently attending __________________________________________

As the parent or guardian of the student named above, I give my permission for him/her to enroll in credit classes at East Central College.

____________________________   __________  _______________________________
Parent/Guardian Signature       Date          Semester

Principal or Counselor’s Signature                                    Date

Comments: _______________________________

Return this form to:

Admissions
East Central College
1964 Prairie Dell Road
Union, MO 63084