Intent to Participate

Dual Admission Program

Partnership between Webster University ar Staint Louis Community College

I understand the Dual Admission agreement and wish to participate in the Dual Admission program between Webster University and SaintouisCommunityCollege I also understand that my personal and academic information, including transcripts, will be sent between Webster a8TLC® order to confirm eligibility in the program, aid in communication between theinstitutions, and to facilitate transfer to Webster University upon completion of my associate degree.

I further understand that I must remain a student in good standing in order to maintain dual admission eligibility, and STLC6as my permission to release information to Websteriversity pertaining to any student code of conduct violations. If I choose to participate in events or services offered through Webster University, I understand I am bound to the Webster student code of conduct.

I understand that this release is valid **the** duration of my Dual Admission between Webster University and St. Louis CommunityCollege I further understand that I may cancel or revoke this authorization at any time in writing. If I do cancel the authorization, I will not be able to continue the Dual Admission program.

Student Signature	Date	
Student Information:		
Name	S	
Year:		
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Year:		
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