

How to Apply for Dual Enrollment

Wilmington University

Visit www.wilmu.edu and click 'Apply Now' (upper right corner)

Create a MyWilmU Account

- Entry Term ~ Fall 2017
- Academic Level ~ Undergraduate
- Academic Programs ~ **Dual Enrollment**...non degree
- Highest Level of Education ~ current high school student

Submit an Application

- Select the last tab 'Early College/Dual Application'
- In the 'Personal Information' Section
 - If you do not have a Social Security # or VISA #, please contact lisa.c.lombardozzi@wilmu.edu or 302.378.0356; 302.327.4721
- In the 'Academic Plans' Section
 - Program ~ **Dual Enrollment** ~ **If you select any other option, you will be charged tuition for this course.**
- Complete the Signature Section
 - The FERPA/Parent Contract may be uploaded after you submit your application.



If you have any questions about this process, please contact WilmU's UIC by visiting www.wilmu.edu and clicking the 'contact us' link.



**WILMINGTON
UNIVERSITY**

Office of the Registrar
320 DuPont Highway
New Castle DE 19720
(302) 356-6930/Fax (302) 328-8907
registrar@wilmu.edu - www.wilmu.edu

Request to Disclose Education Records

It is the policy of Wilmington University, in accordance with the Family Educational Rights and Privacy Act (FERPA), to withhold disclosure of personally identifiable information from educational records unless the student has consented to disclosure or FERPA allows disclosure. For more detailed information, please consult the Catalog.

By signing this form, you give consent to disclose your educational records to your parent(s), legal guardian(s), or other designated person(s). The purpose of the consent is to allow Wilmington University to release educational record(s) or information contained in your educational records to your designated person(s). Such information includes course schedules, reports of concern, grades, disciplinary records, transcripts, content in the student folder and student account information. This does not include your WebCampus account or your username and password. You may revoke this consent at any time by notifying the Registrar's Office.

Check the box(es) below and write the appropriate name(s) to indicate your consent for Wilmington University to disclose educational information to your parent(s), legal guardian(s), or other designated person(s).

- Mother Name _____
- Father Name _____
- Legal Guardian Name _____
- Other (specify) Name _____

Check the box below if you do not authorize Wilmington University to disclose educational information.

- Do not release my educational information.

Please complete the information below and sign.

Student's Name _____ ID# _____

Signature _____ Date _____

