

# Dual Enrollment Academic Verification

## The University of Tennessee, Knoxville

### Personal Data

Student Name: \_\_\_\_\_  
Last First Middle Any Other Name Used

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Birth Date: \_\_\_\_\_

### Enrollment Information

High School: \_\_\_\_\_ Previously enrolled in dual credit? Y N

Expected Year of High School Graduation: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

GPA: \_\_\_\_\_ Composite ACT: \_\_\_\_\_ Math ACT: \_\_\_\_\_ English ACT: \_\_\_\_\_

### Proposed courses to be taken through dual enrollment at the University of Tennessee

Course #	Course Title	Semester	Credit Hours

The above named student meets eligibility requirements and is recommended to participate in the dual credit course(s) listed.

\_\_\_\_\_  
Signature of person verifying GPA/ACT scores

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

Mail completed signed form and transcript to:

Undergraduate Admissions  
Application Management  
202 Student Services Building  
Knoxville, TN 37996-0230