



# Application For Dual Enrollment

P.O. Box 7001  
Longview, Texas 75607

903-233-4300 800-759-8811  
FAX 903-233-4301

admissions@letu.edu  
www.letu.edu

You may return this application by FAX (see above), or by ground mail (ATTN: Undergraduate Admissions Office).

## PERSONAL INFORMATION

Today's Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Name: \_\_\_\_\_  
Last First Middle Initial  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_  
Home Phone Number: ( ) \_\_\_\_\_ Cell Phone Number: ( ) \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Are you a Faculty/Staff Dependent? (circle) Yes No

## PARENT INFORMATION

Parent Name: \_\_\_\_\_ Parent E-Mail: \_\_\_\_\_  
Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## CURRENT HIGH SCHOOL INFORMATION

School Name: \_\_\_\_\_  
Current Grade Level (circle): Junior Senior Expected Graduation Date: \_\_\_\_\_

## LETOURNEAU UNIVERSITY INFORMATION

Entering Semester: Fall (Aug-Dec) 20\_\_ Spring (Jan-May) 20\_\_  
Courses you plan to take: \_\_\_\_\_

## DUAL ENROLLMENT STUDENT STATEMENT

LeTourneau University is a Christian college with a distinct purpose. Admission to LeTourneau University is granted on a special student basis when a student is not pursuing a degree from LeTourneau and desires to enroll in a limited number of semester hours. Additional application information, when needed, may also be requested by the Office of Admissions. LeTourneau University admits students regardless of race, color, sex, and national or ethnic origin.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Dual Enrollment Students **MUST** re-apply each semester. Tuition balance due after class registration.