



Office of Admissions  
**THE UNIVERSITY OF TEXAS AT BROWNSVILLE and TEXAS SOUTHMOST COLLEGE**

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 René Villarreal, Director of Admissions \* Hilda García, Assistant Director of Admissions

**REQUEST FOR CONCURRENT ENROLLMENT**

Director of Admissions,

I request permission to enroll at UTB/TSC while I am attending \_\_\_\_\_ High School in (City/ State)  
 \_\_\_\_\_.

\_\_\_\_\_  
 Student's Name

\_\_\_\_\_  
 High School ID Number

\_\_\_\_\_  
 Date of Birth

\_\_\_\_\_  
 \*Social Security Number

\_\_\_\_\_  
 Student's Signature      Date

\_\_\_\_\_  
 Parent or Guardian Signature      Date

I understand that Rule 4.85 (6) & (7) Title 19 of Texas Higher Education Coordinating Board states that The University of Texas at Brownsville and Texas Southmost College system permits a student who has completed his/her sophomore year in high school, upon recommendation of the principal, to be enrolled in a junior college. The classes shall not exceed more than two dual/ concurrent courses per semester. \*\*

I understand, also, that the following conditions will be enforced if permission for dual or concurrent enrollment of courses is granted:

1. I will be responsible for payment that is not covered by the School District or The University for the charge of tuition, fees, and books of courses taken at The University of Texas at Brownsville and Texas Southmost College (UTB/TSC)
2. I authorize UTB/TSC to provide periodic reports of progress and grades earned in the courses (upon request) to  
 \_\_\_\_\_.

\*\*Students who have completed their sophomore year of high school may, upon recommendation of their school principal be permitted to enroll.

Note: Test scores and/or high school transcript (if using to prove exception based on TAKS) are **REQUIRED** for academic courses.

	English Language Arts	English	Reading	Writing	Mathematics	Verbal	Composite
<b>TAKS EXIT LEVEL</b>		N/A	N/A	N/A		N/A	N/A
<b>THEA</b>	N/A	N/A				N/A	N/A
<b>ACT</b>	N/A		N/A	N/A		N/A	
<b>SAT</b>	N/A	N/A	N/A	N/A			N/A

\_\_\_\_\_  
 Principal's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Counselor's Signature

\_\_\_\_\_  
 Date

\* Social Security number is optional this will ensure your documents are matched and processed promptly

\*\* Exceptions may be considered by the principal of the high school and the chief academic officer of the college.