

CLEVELAND STATE UNIVERSITY



COLLEGE CREDIT PLUS CONTINUING ENROLLMENT

NAME

LAST _____ FIRST _____ MIDDLE _____

DATE OF BIRTH _____

HOME ADDRESS

STREET _____ APT. # _____ CITY _____ STATE _____ ZIP _____

HOME TELEPHONE NUMBER

MOBILE TELEPHONE NUMBER

() - () -

HIGH SCHOOL _____

GRADUATION YEAR (EXPECTED) _____

I INTEND TO PARTICIPATE IN CCP IN: FALL 20 _____ SPRING 20 _____ SUMMER 20 _____

I HAVE ADVANCED PLACEMENT CREDIT YES NO

IF YES, PLEASE INDICATE THE TEST NAME(S) AND YOUR SCORE(S)*

*OFFICIAL TEST SCORES MUST BE SENT TO CLEVELAND STATE TO VERIFY COURSE EQUIVALENCIES.

I HAVE CCP CREDIT FROM OTHER INSTITUTIONS* YES NO

IF YES, PLEASE INDICATE THE INSTITUTION NAME AND COURSE NAME AND NUMBER (IF KNOWN)

*OFFICIAL TRANSCRIPTS MUST BE SENT TO CLEVELAND STATE TO VERIFY COURSE EQUIVALENCIES.

AFTER GRADUATING FROM HIGH SCHOOL, WHAT IS YOUR INTEREST IN ATTENDING CLEVELAND STATE UNIVERSITY?

TOP CHOICE TOP THREE JUST CURIOUS NOT CURRENTLY CONSIDERING