



# Early College Registration Form

MOREHEAD STATE UNIVERSITY

www.moreheadstate.edu/earlycollege

Legal name \_\_\_\_\_

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

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

High school \_\_\_\_\_

Proposed courses to be taken through MSU's Early College Program.

## SPECIFIC COURSE REQUIREMENTS

Minimum math and English **subscores** listed below.

	ACT	COMPASS	KYOTE
Calculus	27		
Chemistry I	22		
College Algebra	22	50	
Physics	22		
Pre-Calculus	24		
Trigonometry	22	50	
Writing I	18	74	6

*Prerequisites must be met before students will be enrolled into requested courses.*

COURSE #	COURSE TITLE	CHOOSE TERM	INSTRUCTOR
		<input type="checkbox"/> Spring 2018	
		<input type="checkbox"/> Spring 2018	
		<input type="checkbox"/> Spring 2018	
		<input type="checkbox"/> Spring 2018	

*Please take a moment to verify the information you've provided, especially your Social Security Number and birthdate.*

Student signature \_\_\_\_\_ Date \_\_\_\_\_

I verify that this information is correct. School official signature \_\_\_\_\_

Mail completed form to: **Registrar's Office, Morehead State University, 201 Ginger Hall, Morehead, KY 40351** or fax to: **606-783-9103**.