



North Hennepin  
Community College

# Early/Middle College Program (EMC) APPLICATION INSTRUCTIONS General College Eligibility

## Qualified Applicants

Only High School students, age 16-20 and are from a participating State Approved Alternative Program are eligible for admission consideration through this Early/Middle College admission process. Students admitted through this program will qualify to take classes in their chosen Career Path that may include both general education courses and career and technical courses.

## Application Deadlines

*Deadlines will be adjusted to the next business day if the date below falls on a weekend. Any applications or supplemental documents received after the deadline will not be considered.*

Fall Semester	Spring Semester	
July 1 <sup>st</sup>	December 1 <sup>st</sup>	

## Early/Middle College Requirements

### Accuplacer Test Scores:

Students must have the following scores to participate:

**Accuplacer Next Gen Reading Test:** 236 or higher

**Accuplacer ESL Test:** 92 or higher in Reading, 3 or higher in Writing, 65 or higher in Vocab, and 77 or higher in Listening

### Approved Schools:

- [Brooklyn Center Academy](#)
- [Highview Alternative Program](#)
- [Osseo Area Learning Center](#)

### **STEP 1: Complete and submit ALL application documents together**

Before submitting your application, make sure that you have included all of the required documents listed below. *Incomplete applications will result in a delay of processing for determination of PSEO eligibility and next steps.*

## PSEO Application Checklist:

- NHCC Early/Middle College Application** (EMC students do not pay an application fee)
- MN Department of Education Notice of Student Registration Form** with signatures from student, parent/guardian and high school official.
- Official High School Transcripts** (in a sealed envelope from the school). Transcripts must include the most recent semester grades.
- Accuplacer Next Gen Reading Test Score** of 236 or higher or **Accuplacer ESL Test** of 92 or higher in Reading, 3 or higher in Writing, 65 or higher in Vocab, and 77 or higher in Listening.



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Date \_\_\_\_\_ Social Security Number \_\_\_\_\_ (optional)

Providing your Social Security number is voluntary. If you choose not to provide the number, your application will still be processed. Providing your Social Security number is required if you are seeking financial aid, veteran's benefits or if you plan to deduct your educational expenses from your federal taxes. Your Social Security number is also used as your initial personal identification number (PIN) for various computer resources such as class registration. Failure to provide your Social Security number may prevent you from having access to these resources. The number is also requested for purposes of administration, program evaluation, and consumer and alumni data.

## PERSONAL DATA (Please print)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Are you a resident of MN?  Yes  No If yes, how long? \_\_\_\_ years \_\_\_\_ months

If no, state of residence \_\_\_\_\_ (If you are not a resident of MN, you are unable to participate in the PSEO program)

Are you a US Citizen?  Yes  No

If no, do you have a status as: \_\_\_\_ Resident Alien \_\_\_\_ Refugee \_\_\_\_ Temporary Protected Status \_\_\_\_ None of these

## ADMISSIONS DATA

What term do you intend to begin taking courses:  Fall  Spring  Summer Year \_\_\_\_\_

Major:  Liberal Arts / AA  Graphic Design  American Sign Language  Business Computer Systems and Management

Do you plan to attend:  Full time  Part time

Have you attended this college before:  Yes  No If yes, last date of attendance: \_\_\_\_\_

## EDUCATIONAL DATA

High School (current):

Brooklyn Center Academy

Highview Alternative Program

Osseo Area Learning Center

Graduation month /year \_\_\_\_\_

*Application Continued on Back Page*

## CONFIDENTIAL INFORMATION

The following information is used for reporting and compliance purposes only. While providing this information is voluntary, it facilitates processes related to your enrollment including assessment testing, creation of your student record, financial aid, veteran's benefits, and tax purposes.

**Gender:**  Female  Male

**Are you Hispanic or Latino?**  Yes  No

*(A person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American or other Spanish culture, regard-less of race)*

**Race and ethnic background - Please select all that apply:**

\_\_\_ American Indian or Alaska Native *(A person having origins in any of the original peoples of North & South America)*

\_\_\_ Asian *(A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent)*

\_\_\_ Black or African American *(A person having origins in any of the black racial groups of Africa)*

\_\_\_ Native Hawaiian or Pacific Islander *(A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other)*

\_\_\_ White *(A person having origins in any of the ordinal peoples of Europe, the Middle East or North Africa)*

\_\_\_ Two or More Races

## Supplemental Documents

**By initialing each item below, I verify that all required materials listed below have been are being submitted along with my application.**

\_\_\_\_ MN Department of Education [Notice of Student Registration](#) with signatures from student, parent/guardian and high school official.

(Initials)

\_\_\_\_ Official High School Transcripts (in a sealed envelope from the school). Transcripts must include the most recent semester grades.

(Initials)

## Signature

In signing this application, I certify that the information I have provided on this application form and in all other admission application materials is complete, accurate and true to the best of my knowledge. I also certify that I have thoroughly reviewed and agree to all of the terms listed on the PSEO Agreement of Understanding.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Access to Student Records

Required The college will not permit access to or the release of personally identifiable information contained in student educational records without the written consent of the student to any third party, except as authorized by the MGDPA and FERPA or other applicable law. A copy of the Release of Private Educational Data form is available in Student Services offices, academic areas, and the college Information Drive. A written consent is valid if it: 1) specifies the records that may be disclosed; 2) states the purpose of the disclosure; 3) identifies the person(s) to whom the disclosure may be made; and 4) is signed and dated by the student. If the release is for disclosure to an insurer or its representative, the release must also include an expiration date no later than one year from the original authorization, or two years for a life insurance application. If the student requests, the school shall provide him or her with a copy of the records released pursuant to the informed consent.

*NHCC is a member of the Minnesota State Colleges and Universities System and an Equal Opportunity Educator and Employer.  
For disability accommodations call 763-493-0555. Minnesota Relay users may call 1-800-627-3529.*