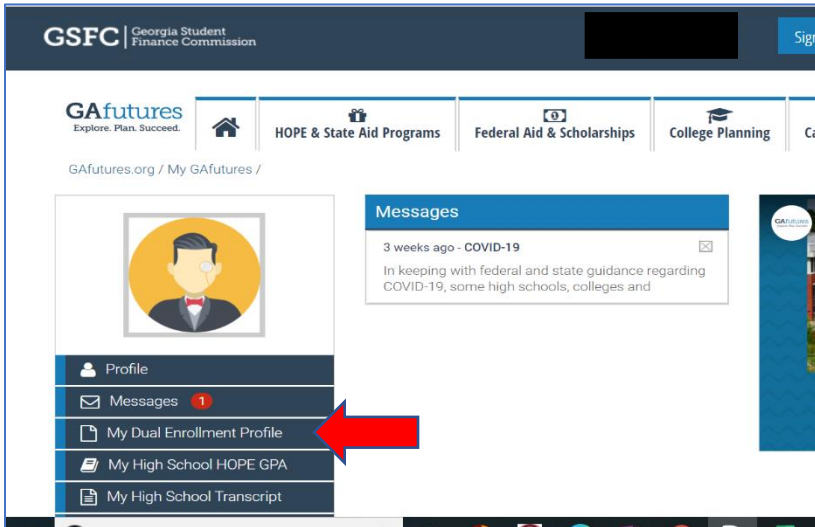


Student: How to Submit a DE Funding Application

1. Login to your GA Futures account at www.gafutures.org.

You must have a complete PROFILE which includes your full name, date of birth, (double check this) social security number and list your high school. Failure to have any of those items, will prevent you from completing your form.

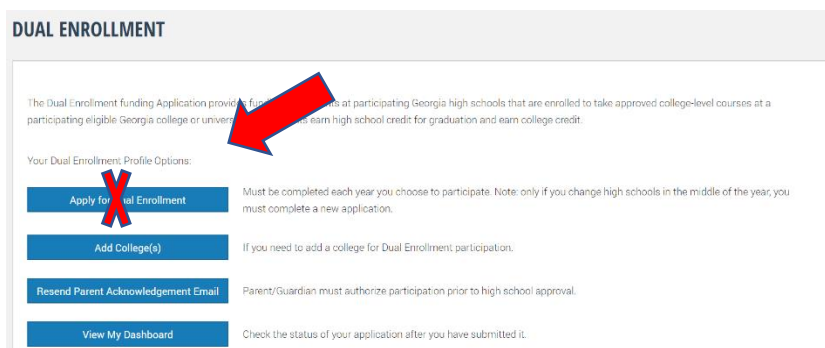
2. On the left side of the main page, click on “My Dual Enrollment Profile”.



3. Click on “The upcoming 2020-2021” in blue in the middle of the page.



4. Choose “Apply for Dual Enrollment”.



5. Complete and acknowledge the required information. You will electronically sign the form and submit.

DUAL ENROLLMENT APPLICATION

[Return to My Dual Enrollment Profile](#)

[Print](#)

A new application must be completed and submitted each year you plan to enroll in college with Dual Enrollment. Refer to the Dual Enrollment Course Directory for approved courses which you may enroll and receive Dual Enrollment funding. Your counselor may approve courses up to the per term maximum of 15 semester or 12 quarter hours. A new application must be completed and submitted each year you plan to enroll in college with Dual Enrollment. Refer to the Dual Enrollment Course Directory for approved courses which you may enroll and receive Dual Enrollment funding. Your counselor may approve courses based on your eligibility.

I understand that failure to enroll in and pass designated courses may result in my not graduating with my class. I understand that any credits earned under this program may or may not be transferable to a University System or other College; this is determined by the college transferring into. I also understand that any refund resulting from withdrawal from a college will be returned to the Georgia Student Finance Commission. Further, I authorize the college(s) named below to forward a transcript of my grades to my high school.

An asterisk (*) indicates a required field.

Student Demographics

First Name
 MI
 Last Name
 SSN
 DOB

Home Address
 ZIP
 City
 State

Phone Number
 Student's Email Address

Parent/Guardian Email Address *
 Confirm Parent/Guardian Email Address *

Parents's email address must be different than the student's email address. Check this box if your parent/guardian does not have an email address.

High School

Are you attending High School or Home Study? *

High School
 Home Study

High School *

Allatoona High School (110057)

I plan to enroll in Dual Enrollment course(s) during the school year Select School Year * *

During the school year I selected, I will be in the Select Grade * grade.

College Selection

Select the school year you plan to take Dual Enrollment course(s) to see participating college(s) or universities.

Participation Agreement

Student must complete acknowledgements before participating. After your acknowledgement is completed, your parent/guardian will be notified for parent/guardian acknowledgement. Review and check each box.

Student Acknowledgement	Parent/Guardian Acknowledgment	
<input type="checkbox"/>	<input type="checkbox"/>	The student must apply for admissions and be accepted by the college (postsecondary institution) as a Dual Enrollment student.
<input type="checkbox"/>	<input type="checkbox"/>	Dual Enrollment funding is capped at a total of 30 semester/45 quarter paid hours. The per term maximum is 15 semester or 12 quarter hours.
<input type="checkbox"/>	<input type="checkbox"/>	The student and parent/guardian must discuss with the high school advisor. Dual Enrollment expectations and responsibilities in conjunction with the student's graduation plan. The student must provide the advisor with proof of acceptance into the postsecondary institution and receive approval from the advisor before any course/schedule changes are made.
<input type="checkbox"/>	<input type="checkbox"/>	All attempted postsecondary courses and grades become a part of the student's permanent high school and college academic history and transcript records.
<input type="checkbox"/>	<input type="checkbox"/>	Be aware of your schedule - courses taught on the college campus follow the college calendar and courses taught on the

HOPE Grant Implications

I acknowledge, once I, the student, reach the 30 semester or 45 quarter paid hours Dual Enrollment funding cap, I may qualify to receive HOPE Grant Bridge funding. Should I qualify and accept HOPE funding, the credit hours funded by HOPE Grant will be applied toward the HOPE S. Zell Miller Grant 63 semester Paid Hours limit and toward the HOPE S. Zell Miller Scholarship 127 semester or 190 quarter Combined Paid-Hours limit. Student must meet HOPE Grant eligibility requirements. For questions, discuss this option with your College's Financial Aid Office.

I understand

I certify that the information reported and on any other document or writing in connection with this application is true, correct and complete to the best of my/our knowledge. I authorize release and exchange of information between the Georgia Student Finance Authority, educational institutions, and educational state agencies, and agree that such information exchanged may include financial, enrollment, academic status, identification, legal residency, and location information necessary to assure proper administration of this program. I understand that any willfully false statements made for the purpose of enabling the student to establish eligibility for, or to wrongfully receive, state student aid funds, may be subject to fine or imprisonment, or both, herein may result in prosecution for violation of Georgia Laws 1976, pp. 1249, 1319, which states that false swearing shall be punished by a fine of not more than \$1,000 or imprisonment for not less than one or more than five years or both. I also understand that any refund of fees, paid resulting from withdrawal from a postsecondary institution, will be returned to the Georgia Student Finance Authority. Further, I authorize the postsecondary institution, to forward a transcript of grades to the high school or home study, at the end of the term (s) named.

Student Signature *

First Name
 Last Name

signed: 04/15/2020

[Submit](#)

6. You will submit your form and the next page will show "**Your Application ID**". Write it down!

Your parents will receive an email to complete the "**Parent Acknowledgment**". This **MUST be done**, or your classes will not be entered by your high school and you will not receive funding for any dual enrollment courses. Parents must give permission for you to participate.

DUAL ENROLLMENT APPLICATION

[Return to My Dual Enrollment Profile](#)

Thank you for your Dual Enrollment funding Application!

Your Application ID is DE [REDACTED]

An email has been sent to your parent/guardian's email address, as provided in your application, with instructions for acknowledging your Dual Enrollment funding Application and participation.

- Your parent/guardian must complete the Parent Acknowledgement for your Dual Enrollment funding Application prior to you being able to enroll in Dual Enrollment courses.
- Once your parent/guardian submits the acknowledgement, your High School and the College you plan to attend must approve your application.
- If you have not submitted an admissions application to the college(s) you want to participate in Dual Enrollment, visit the college website to apply.

After your parent/guardian acknowledges your application, you can monitor the progress of your application by selecting the My Dual Enrollment Profile link after signing in to GAFutures. If your parent does not have an email address, have them visit [GAFutures.org/DEparent](https://www.gafutures.org/DEparent) to complete the agreement.

7. Document the Application ID number and give it to your parent/guardian. (write it down, text it, email it, etc.) You can always log back into your GAFutures account to get it, but it will be easier if you go ahead and write it down and give it to them.

8. Follow up with your parent/guardian to make sure they received the email. It will be from the email listed below.

noreply@gsfc.org

<<https://www.gafutures.org/Images/logo-temp.jpg>>

Dear Parent / Guardian,