

Bucks County Community College and Temple University

**DUAL ADMISSIONS INTENT TO ENROLL FORM**

Former Temple University students are not eligible for this program.

**PLEASE PRINT**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Last four digits of SSN: \_\_\_\_\_ Bucks ID # \_\_\_\_\_

Address: \_\_\_\_\_

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

Primary phone: \_\_\_\_\_ Email address: \_\_\_\_\_

Do you currently have 30 or fewer credits from Bucks **and** any other institution? (Students must have thirty or fewer completed credits from all institutions attended in order to be eligible for Dual Admissions.)

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you previously attended another college? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what institution(s) \_\_\_\_\_

**Note: Failure to disclose credits earned from other institutions may negate program eligibility.**

Major at Bucks: \_\_\_\_\_

Semester you began at Bucks (m/y) \_\_\_\_\_

Expected Date of Graduation from Bucks: \_\_\_\_\_

Intended major after transfer: \_\_\_\_\_

**(Dual Admissions does not guarantee admission into specific majors as some majors have additional admission requirements)**

Date you expect to enroll at Temple: \_\_\_\_\_

I wish to enroll in the Dual Admissions Program with Temple University. This program allows me to be admitted into Temple University after meeting certain conditions, and completing my associate degree from Bucks. I understand that I must complete Temple's online application and indicate that I am a Dual Admissions student; the semester before I am ready to transfer by the required deadline. I understand that Temple University will waive my application fee. I understand that a minimum 2.3 cumulative GPA is required for Dual Admission into Temple (and a 3.3 or higher GPA for scholarship). I authorize Bucks and Temple to exchange information, as needed, including the information on this form, and academic transcript data, in order to facilitate my transfer under this agreement. I understand that it is my responsibility to apply for graduation at Bucks and that in order to maintain my Dual Admissions status, I must enroll at Temple within one year of my graduation and cannot attend another institution of higher learning before I enroll at Temple.

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed form to the Bucks County Community College Registrar's Office, Links Pavilion,  
First Floor, or email to registrar@bucks.edu**

**FOR BUCKS OFFICE USE ONLY**

Bucks: Start Term \_\_\_\_\_ Term Reg \_\_\_\_\_ Completed Credits \_\_\_\_\_

Prior C/U \_\_\_\_\_ Tran \_\_\_\_\_

Prior C/U \_\_\_\_\_ Tran \_\_\_\_\_

Eligible \_\_\_\_\_ BCCC Signature \_\_\_\_\_ Date \_\_\_\_\_