

CONCURRENT CREDIT ENROLLMENT FORM

UNIVERSITY OF CENTRAL ARKANSAS

Office of the Registrar

Phone 501-852-7407 -450-5734
Fall 2023-Spring 2024

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Section to be completed by Student (Please PRINT CLEARLY and COMPLETELY)

Use Legal Name

Last Name: _____

First Name: _____

Middle Name or Initial: _____

Preferred Name : _____

High School: _____

Date of Birth: _____

SS Number: _____

New Concurrent Student: _____

Returning Concurrent Student: _____



Note: The University of Central Arkansas (UCA) reserves the right to make the final determination on enrollment. Each student enrolling in a concurrent credit course must meet or exceeds the stipulated test score and GPA requirements for each respective course selected.

In addition, any sophomores interested in participating in the UCA Concurrent program must also submit a letter from their HS Counselor granting permission and confirmation that all prerequisite requirements have been acquired.