



(print legibly)

REGISTRATION STEPS

- Step 1: Complete one form per semester. Get all signatures.
Step 2: Once a year, apply at andrews.edu/apply. Complete a new application and submit.
Step 3: Scan required documents to upload with application:
- Upload registration form or email to precollege@andrews.edu
- Home/unaccredited schools: upload high school transcript and standardized test scores (see Qualifying Scores for Dual Enrollment at michigan.gov/dualenrollment)
- With first math or science class: upload official ACT/SAT scores or take AU Math Placement Exam (info at andrews.edu/go/MPE)

TUITION AND FEES 2024-2025

- Tuition: \$160 per credit
Guest Fee: \$85 per term
Registration Change Fee: \$40
Incomplete Fee: \$40
Course/Lab Fees: See Course Schedule

For more info: andrews.edu/precollege

STUDENT AGREEMENT

I am in Grades 10, 11 or 12. My high school GPA is at least 3. I will complete this year's orientation when prompted by email. I give permission for my school to request enrollment and transcript information.

Student Name _____ AU ID _____ Phone _____

Email Address _____ Signature _____ Date _____

As parent, I approve this enrollment. Parent Signature _____ Date _____

COURSE REGISTRATION

Semester of Enrollment (Pick One):

FALL 2024

- Finish Steps 1-3 by August 16
Classes begin August 26
Last full tuition refund is August 28
Last day to withdraw is November 18

SPRING 2025

- Finish Steps 1-3 by December 27
Classes begin January 13
Last full tuition refund is January 15
Last day to withdraw is April 15

Enter course information below to register. Find section number, CRN, and fees in the course schedule online at vault.andrews.edu/schedule

Table with 7 columns: Course Number, Section #, CRN, Course Title, # Credits, Course Fees, Tuition & Fees. Includes example row and a TOTAL row.

SCHOOL AGREEMENT

Student GPA _____ Class Standing: Sophomore Junior Senior

If this student has taken ESL classes, attach current high school transcript.

We verify that this student is prepared to succeed at the college level: School Name _____

Registrar/Counselor Signature _____ Email _____ Date _____

FINANCIAL AGREEMENT

Parent pays Andrews in full by start date (Fall-August 26; Spring-January 13), following emailed instructions.

Amount parent will pay: _____

Name (please print) _____

Email _____

Parent Signature _____

School or partnership accepts billing, distributing per school or partnership policy.

Approved amount to bill: _____

Name (please print) _____

Email _____

Signature _____