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Lorain County Community College

CollegeCredit

College Credit Plus (CCP) is a popular choice for students – and for good reason. This program allows students to earn college credits while in high school, all for free. Under this program, students enroll in courses at LCCC and receive dual credit for high school requirements and for college credit. These credits may be used at LCCC or for transfer to the college or university of choice after high school graduation. Even books and other fees are covered for students.

Application for Participation Procedures

Students wishing to participate in College Credit Plus or Credit In Escrow are required to complete the following steps.

- The application materials contained in this packet: Section 1 LCCC
 Application for Admission; Section 2 High School/School District Information;
 and Section 3 Emergency Medical Treatment Authorization Form.
- Official high school transcripts (or equivalent for home-educated students), need to be received by LCCC prior to enrollment in college courses. Students should request that the high school submit their transcript with their application.
- Students may submit their application to either their high school counselor
 or the completed application and transcript may be mailed directly to the
 LCCC Special Admissions Office, 1005 North Abbe Road, Room LC157, Elyria,
 OH 44035.
- Students must complete the COMPASS assessment or submit ACT or SAT scores in order to be considered for the program.
- All new students must complete an orientation and meet with an LCCC advisor or counselor prior to scheduling classes.

Section

Student No._ School

LCCC APPLICATION FOR ADMISSION

1005 Abbe Road North • Elyria, Ohio 44035 Elyria 366-4032 • Toll Free 800-995-5222

Please use blue or black ink. Complete numbers 1 through 19 of the application.

Last		First	Middle Initial	
2. Socia	l Security Nun	nber (required for sta	ate reporting):	
3. Pleas	e list all forme	er names:		
Last/Maiden		First	Middle Initial	
		information (2 Pos	t Office Box is not a legal address	
4. Legal	home address	illioilliation (a ros		
4. Legal Number	Street	Apt.	County	
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OFFICE USE ONLY

Standing_

Number	Street	Apt.	County
City	State	Zip	Country
Area Code	e/Telephone N	lumber L	ength of Time at This Address
		PAGE 1500 1 TO 1	nt student, give the name and whom you are dependent:
First Name	e	Middle Initial	Last Name
Number	Street	Apt.	County
City	State	Zip	Country
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7. Gend	er: 🗌 Fema	le 🗆 Male	
8. Date	of birth:		
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Birthplace	City	State	Country
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(Continued on reverse side)

Are you dependent for more than one-half of your financial support on a

person residing in Lorain County?

Yes No