

## High School Dual Enrollment

High School students enrolling with TCAT (Tennessee College of Applied Technology) Shelbyville will complete the online Dual Enrollment application for the program of study.

High School Student – Items needed prior to completing the application: Full Legal Name, SSN, DOB, Student's Personal Email, Mailing Address, and Immunization History

Direct the student to submit one online Dual Enrollment Application for the program of study from the institution's website: <https://tcatshelbyville.edu/>

1. Click on "Future Students" and then "Admissions"
2. Click on the red "Apply Now" button
3. Click on "First time user account creation"
4. Create a Login ID and PIN  
\*Student will need to store/remember login credentials

The following images will show:

**Select an Application Type**

To Apply for Admissions, first select the Application Type you want to complete, then press **Continue**.

- Select **New College Applicant** if you are a first time enrollment at a Tennessee College of Applied Technology.
- Select **Returning TCAT Applicant** if you are a former or transfer TCAT student returning to the same program or a new program.
- Select **Dual Enrollment** if you are a high school student interested in earning college level credit. Please note that you do need high school counselor approval
- Select **Special Industry/Supplemental** if you are sponsored/contracted by your employer or if you are interested in courses providing additional skills training requisite to a diploma program.

**Application Type:** 03 Dual Enrollment Applicant \*

\*Select Fall 2022

## Apply for Admissions

Please choose the earliest admission term you will be available to start your selected  
Enter your full name using the appropriate capitalization. For example: *John Smith*  
Click **Fill Out Application** to continue.

\* - indicates a required field.

**Application Type:** 03 Dual Enrollment Applicant

**Admission Term:**\* Select... ▼

**First Name:**\* Dual

**Middle Name:**

**Last Name:**\* Test

[Fill Out Application](#)

## Name (Checklist item 1 of 8)

Enter your full name using the appropriate capitalization. For example: *John Smith*  
Select **Checklist** to save your changes and display the Application Checklist; **Continue** to n  
Menu.

\* - indicates a required field.

**First Name:**\* Dual

**Middle Name:**

**Last Name:**\* Test

**Suffix:**

[Checklist](#) [Continue](#) [Finish Later](#)

**Personal Information** (Checklist item 2 of 8)

Enter your Personal Information.

Your Social Security Number is required for Financial Aid processing and tax purposes. If you do not have a Social Security Number, please contact the Admission Office. Select **Checklist** to save your changes and display the Application Checklist; **Continue** to move to the next section of the Application; **Finish Later** to save your change

\* - indicates a required field.

SSN (XXXXXXXX):\*

Birth Date:\*      Month None    Day None    Year (YYYY)

Email:\*

Verify e-mail address:\*

Gender:\*       Male    Female

Citizenship:\*      U.S. Citizen or National

What is your ethnicity?

- Hispanic or Latino
- Not Hispanic or Latino

Select one of more races to indicate what you consider yourself to be.

<b>American Indian or Alaska Native</b>	<b>Asian</b>	<b>Black or African American</b>	<b>Native Hawaiian or Other Pacific Islander</b>
<input type="checkbox"/> Alaska Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<input type="checkbox"/> American Indian			

**Mailing Address** (Checklist item 3 of 8)

Enter your Mailing Address Information.

Select **Checklist** to save your changes and display the Application Checklist; **Continue** to move to the next section of the Application Menu.

\* - indicates a required field.

**Mailing**

Street Line 1:\*      1 Bridgestone Park

Street Line 2:

Street Line 3:

City:\*      Nashville

State:\*      Tennessee


Zip Code:\*      37214-2453

County:      TN-Davidson

Phone Number (xxxxxx)-(xxxxxxxxxxxx) (xxxxxxxxxx extension):      -

Next Section - Permanent Address (optional) - (Checklist Item 4 of 8) (image not provided)

## Program of Study (Checklist item 5 of 8)

 Select your Program of Study. If applicable, select a Concentration.

Select **Checklist** to save your changes and display the Application Checklist; **Continue** to move to Menu.

\* - indicates a required field.

**Program of Study:**\* None ▼

Enter Other Majors, Minors and Concentrations

Checklist Continue Finish Later

## High School (Checklist item 6 of 8)

 Use the **Lookup High School Code** link to search for your last attended High School.

- If you cannot find your high school through the lookup page, enter the information below.
- If you are a Home School student, only check the Home School box below.
- If you have a High School Equivalency, please enter the following school code 888888.

Select **Checklist** to save your changes and display the Application Checklist; **Continue** to move to the next section of Application Menu.

▶ - indicates a required field.

**Home School (check for yes):**

**High School Code:** 430657 [Lookup High School Code](#)

### If School not found:

**High School Name:**\* Fairview High School

**High School Street1:** 2595 Fairview Boulevard

**High School Street2:**

**High School Street3:**

**High School City:** Fairview

**High School State:** Tennessee ▼

**High School Zip Code:** 37062

**Graduation Date:** Month None ▼ Day None ▼ Year (YYYY)

**GPA:**

### Immunization Questions (Checklist item 7 of 8)

Enter your answer to each Essay question. Each answer can be up to 32,000 characters long.

When completing sections, selecting Checklist saves your changes and displays the Application Checklist. Continue moves to the next section. Finish Later saves your changes and displays the Application Menu. Use the Return to Checklist without saving changes link to navigate to different sections.

✖ - indicates a required field.

#### A. Hepatitis B (HBV) Immunization

[Click here for more information](#)

I hereby certify I have read the above information regarding Hepatitis B (HBV), and that I have:

- A. Had the entire series of the Hepatitis B vaccine
- B. Elected not to receive the Hepatitis B vaccine
- C. Elected to receive the Hepatitis B vaccine and/or am in the process of receiving the complete three dose series of the Hepatitis B vaccine

#### B. Measles, Mumps, and Rubella (MMR) and Varicella Immunizations

[Click here for more information](#)

I hereby certify I have read the above information regarding Measles, Mumps, and Rubella (MMR) and Varicella, and that I have:

- A. Had the entire series of the MMR and Varicella vaccines
- B. Elected not to receive the MMR and Varicella vaccines
- C. Elected to receive the and/or am in the process of receiving the complete series of the MMR and Varicella vaccine

### Additional Questions (Checklist item 8 of 8)

Please respond to the following questions.

When completing sections, selecting Checklist saves your changes and displays the Application Checklist. Continue moves to the next section. Finish Later saves your changes and displays the Application Menu. Use the Return to Checklist without saving changes link to navigate to different sections.

✖ - indicates a required field.

- All male US citizens and non-citizens who take up residency in the United States of America before their 26th birthday must register with Selective Service prior to registering for classes. This requirement does not apply to veterans and others exempt by federal law. Have you registered for the United States Selective Service? Select ▼
- If you are not registered for selective service, is it because you are one of the following categories: female, active duty in armed services, male over 26 years of age, not yet 18 years of age, born before 1960, Permanent Resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands? Yes No

[Checklist](#) [Continue](#) [Finish Later](#)

[Return to Checklist without saving changes](#)

## Application Checklist

TOUR CURRENT INSTITUTION IS **TN**.

Fill out the application. A checklist is provided to help you complete it. You can complete each section in any order you wish.

Select **Application is Complete** when you have completed the application. Select **Finish Later** if you would like to finish your application later.

<input checked="" type="checkbox"/> Name	<input checked="" type="checkbox"/> Program of Study
<input checked="" type="checkbox"/> Personal Information	<input checked="" type="checkbox"/> High School
<input checked="" type="checkbox"/> Mailing Address	<input checked="" type="checkbox"/> Immunization Questions
<input checked="" type="checkbox"/> Permanent Address	<input checked="" type="checkbox"/> Additional Questions

Application is Complete    Finish Later

[Email for questions about the checklist.](#)

[Back](#)

Upon submission of the application, the student's application is pushed through the Tennessee Board of Regents nightly process. Bethany Swing, Admissions and Records Specialists at TCAT Shelbyville will resolve any errors or suspended applicant records. Any potential duplicate person match identified will be closely reviewed before creating a student ID number. Mrs. Swing will then add an attribute code for the Dual Enrollment student and enter add a series of admissions decision codes (WA, AC, and CN) on the student's record. The student will receive email notifications for each decision code placed on the student record. A campus email address will also be generated. **\*It is important for the Dual Enrollment Student to check both their personal email and campus email for official communications from TCAT Shelbyville.**