



Admissions and Records

5151 Pacific Avenue, Box 102
Stockton, CA 95207
Phone: (209)954-5151 Ext. 6181

College Early Start Form

This form MUST be completely filled out and a Private School Affidavit (if home-schooled) attached.
A SEPARATE FORM IS REQUIRED FOR EACH TERM FOR WHICH THE STUDENT WISHES TO ENROLL.

The student named below is recommended as a special PART-TIME community college student to undertake course(s) of instruction offered at the community college level. The intent of this recommendation is to provide educational enrichment opportunities for the student as authorized in Education Code 48800 and 76001. Students may not register in a course with a prerequisite unless the prerequisite has been met.

Last Name: (Print) _____ First: (Print) _____ Middle: (Print) _____
Delta College Student ID # _____ Birth Date _____ Grade level when Delta course(s) begin:
☐ Frosh. ☐ Soph. ☐ Jr. ☐ Sr
High School Currently Attending: _____ High School Graduation Date: _____

SECTION A: COURSE PLANNING GUIDE

Semester: (circle one)	Dept/No	Course Title	College Units (Max 11.0 units)
Summer			
Fall			
Spring			

SECTION B: THIS SECTION MUST BE COMPLETED BY HIGH SCHOOL REPRESENTATIVE(S) ONLY.

REQUIRED CERTIFICATION

ALL TERMS (Summer, Fall & Spring)

Yes No

- ☐ ☐ I give permission for this student to enroll at San Joaquin Delta College in the above course(s) and verify that this student has demonstrated adequate preparation in the discipline(s) to be studied and the ability to benefit from advanced scholastic or vocational course work.
- ☐ ☐ I confirm that the student is able to demonstrate the level of maturity necessary to act in a responsible and ethical manner in observance of the college's code of rules and regulations and that the student can perform adequately in courses requiring a high level of physical maturity and dexterity.
- ☐ ☐ I confirm that this student has not been subject to disciplinary action resulting in suspension or expulsion at the high school. A letter from the school Principal fully explaining what lead to the disciplinary action must be attached along with current transcripts.
- ☐ ☐ I confirm that our District will not claim ADA for this student in the above courses (does not apply to contract education classes).

SUMMER (In addition to above section):

Yes No

- ☐ ☐ The student has exhausted all opportunities to take this course(s) or an equivalent within his/her district of attendance.
- ☐ ☐ Enrollment of this student complies with the requirement allowing only 5% of the total number of students enrolled in the school's grade level to be recommended for admission to Delta College. (Ed Code Section 76001(i)).

High School Counselor Signature _____

Date _____

High School Principal (or designee) Signature _____

Date _____

We declare under penalty of perjury that the information submitted in connection with determination of admission as a special parttime student is true and correct. All materials submitted become the property of Delta College. We understand that falsification, withholding pertinent data, or failure to report data changes may result in dismissal.

Parent/Guardian Signature _____

Date _____

Student Signature _____

Date _____