ECCO Application for Admission

Early College Credit Opportunities

Technical College of the Lowcountry - ECCO Application
921 Ribaut Road, PO Box 1288, Beaufort, SC 29901
P. 843.525.8356 | F. 843.470-8416

www.tcl.edu/ecco
Early College Credit Opportunities (ECCO)  
Application for Admission

ECCO CONTACT INFORMATION  
Ms. Teresa Cope, Educational Technology Coordinator/Testing Coordinator/ECCO Coordinator  
ECCO Coordinator Office: Beaufort Campus, Building 1, Room 202  
Phone: 843-525-8356  
Fax: 843-470-8387  
Email: ECCO@tcl.edu

TCL Campuses  
Beaufort Campus • 921 Ribaut Road • Beaufort, SC 29901 • 843.525.8211  
Hampton Campus • H. Mungin Center • 54 Tech Circle • Varnville, SC 29944 • 803.943.4262  
New River Campus • 100 Community College Dr. • Bluffton, SC 29909 • 843.470.6000

INSTRUCTIONS FOR COMPLETION  
of Early College Credit Opportunities (ECCO) FORMS  
Please follow this simple checklist to make sure you have completed all of the ECCO forms and attached all of the required materials to be eligible for the ECCO program:

Please complete and attach.

☐ An ECCO Application for Admission (5 pages) completed and signed by the student. A copy of the student's high school transcript. A copy of the student driver's license, SC State ID Card, birth certificate, passport, or US Citizenship form.

Please complete and sign.

☐ The FAFSA Wavier Application must be completed prior to registration of classes. The student will NOT be eligible for SC Lottery Tuition Assistance without this form.

Please complete and sign.

☐ The ECCO Agreement must be completed prior to the registration of classes. The form must be signed by the student, the parent/guardian and the ECCO High School Coordinator/Counselor.

Please complete and sign.

☐ The ECCO Registration Form completed and signed by the student and the ECCO High School Coordinator/Counselor acting as the advisor. Please be sure to include your email address and phone number.

Please complete and sign.

☐ The Tuition Promissory Note is signed by the student and parents. A Student ID Number is required.

Please complete and sign.

☐ The Dropping/Withdrawing & FERPA form is signed by the student.

Please complete and sign.

☐ The Driver's License/U.S. Citizenship form is signed by the student.

Please be sure to include all information requested and return the forms to the ECCO High School Coordinator/Counselor.

Statement of Non-Discrimination: The Technical College of the Lowcountry is committed to a policy of equal opportunity for all qualified applicants for admissions or employment without regard to race, gender, national origin, age, religion, marital status, veteran status, disability, or political affiliation or belief.
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Please submit this application with the six (6) ECCO forms. (Please print clearly)

1. **U.S. CITIZENSHIP STATUS**

<table>
<thead>
<tr>
<th>U.S. Citizen</th>
<th>Other/Country of Citizenship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal permanent resident (must present alien registration card at time of application)</td>
<td></td>
</tr>
<tr>
<td>Alien Registration Number</td>
<td>Exp. Date</td>
</tr>
<tr>
<td>Refugee (must present INS card at time of application)</td>
<td></td>
</tr>
<tr>
<td>Current Visa Type:</td>
<td>Nation of Issue:</td>
</tr>
<tr>
<td>Issuing Authority:</td>
<td>Port of Entry:</td>
</tr>
<tr>
<td>Applying for Certificate of Eligibility (Form I-20) in order to obtain a student visa.</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Country of birth:**

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**Declaration of Citizenship or Legal Presence in the United States**

The South Carolina Illegal Immigration Reform Act (S. C. Code Ann. §59-101-430 [Westlaw 2008]) prohibits those unlawfully present in the United States from attending a public institution of higher education in South Carolina and from receiving a public higher education benefit. By signing this statement, you attest that you are a U.S. Citizen, a legal permanent resident in the United States, or an alien lawfully present in the United States. In addition, the college may require you to submit documentation that supports your claim.

Any student providing false information may be subject to dismissal from the college. Any student who is found to be unlawfully present in the United States will be dismissed from the college.

____________________________________ (Print Name) ____________ (Date of Birth)
__________________________________________ (Signature) ____________ (Date)

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**You must provide one of the following forms of documentation:**

- A Certified Birth Certificate indicating that you were born in the United States or a territory of the United States. *A photocopy of your birth certificate is not acceptable.*
- A South Carolina driver's license if you were issued your license for the very first time after January 1, 2002;
- Current U.S. Passport or U.S. Passport that has not been expired for more than 10 years;
- Certificate of Naturalization -- USCIS Form (N-550 or N-570);
- U.S. government issued Consular Report of Birth Abroad;
- Certificate of Citizenship (N-560 or N-561); or

**NOTE:**

- If your name has changed since birth, you must present all legal documents (i.e., adoption records, marriage certificate, certificate of naturalization, and court ordered name change) supporting all name changes from the name which appears on the birth certificate or proof of citizenship to the present.
- To avoid relinquishing an original document (*e.g., birth certificate), you may present it in person. Students whose citizenship has not been verified will be denied further enrollment until the necessary documentation has been provided.
2. BIOGRAPHICAL INFORMATION

Social Security Number ________________ - ________________ - ________________
Date of Birth (mm/dd/yyyy) __________/__________/__________
Last Name ___________________________ First Name ___________________________ MI ______
Address _______________________________ County ________________________________
City ___________________________ State __________________ Zip ________________
Home Phone ______ - _______ - _______ Work Phone _______ - _______ - _______
E-mail ________________________________
Emergency Contact _______________________ Emergency Phone _______ - _______ - _______
Please list all previous names that appear on your academic records: ____________________________
Other full names: ____________________________

The Technical College of the Lowcountry collects and reports data regarding the overall characteristics of the College’s student body to the U.S. Department of Education. Your answers to the following questions allow us to report information accurately and assist the institution in planning for future programming. Providing the information is OPTIONAL and does not impact admissions to this institution.

(Circle all that apply)

Gender: Male Female
Marital Status: Single Married Divorced/Separated
Ethnicity: Black, Non-Hispanic White, Non-Hispanic Hispanic of Any Race Two or More Races Asian Pacific Native Hawaiian/Pacific Islander American Indian/Alaska Race & Ethnicity Unknown

3. TERM (Please circle semester)

Entering Term: Fall Fall1 Fall2 Fall 12-week Year __________
Spring Spring1 Spring2 Spring 12-week Year __________
10-week Summer 7-week Summer Year __________

Intended Program of Study/Major:
________________________________________________________

Have you attended TCL before? ________ If so, when did you last attend? Month _______ Yr _______

College Credit Status: Have you been a dual-enrollment student at another high school? Yes No
If yes, how many credits have you earned?
________________________________________________________
5. HIGH SCHOOL/COLLEGE CREDIT INFORMATION

As a high school student, indicate anticipated graduation date below.

List the high school you are currently attending, the previous high school you have attended if applicable, and any previous college/university credit you may have received through another dual enrollment program.

Official high school and college/university transcripts must be submitted for evaluation of previous credit.

<table>
<thead>
<tr>
<th>Full Name of High School</th>
<th>State</th>
<th>Dates</th>
<th>Anticipated Graduation Date</th>
<th>College/University Credit Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>No abbreviations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Include branch if applicable</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current High School

Previous High School

6. RESIDENCY

The Technical College of the Lowcountry is required to determine the residence classification of applicants in accordance with the South Carolina Code of Laws 59-112-20. The cost of tuition and fees will be determined by the student’s residency status at the time of application. Please be prepared to provide supporting documentation. Additional information may also be requested.

If you are claimed as a dependent for federal tax purposes, answer the questions based upon the residence status of the person who claims you as a dependent. If you answer “yes” to 2 of the questions or are active-duty military in South Carolina you could receive in-state tuition and fees.

1. Have you lived in South Carolina continuously for the last 12 months?  Yes  No
   If less than one year, please provide the State you resided in previously: ______________________

2. Do you have a SC driver’s license or SC State ID?  Yes  No  If, yes, provide the Issue date _________
   If no, what is the issuing State of your driver’s license __________________________ Issue date _________

3. Did you or the person who claims you as a dependent for federal tax purposes, file a South Carolina income tax return for the last tax year?  Yes  No
   If yes, under what status was the return filed?  _____ full-year resident  _____ part-year resident  _____ non-resident
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7. MILITARY
* Are you a dependent of an active duty military member of the U.S. Armed Forces stationed in SC?  Yes  No
* Please include a copy of your original orders to South Carolina & your Military ID

8. STUDENT IMAGES/RELEASE OF DIRECTORY INFORMATION
I understand my image (photo or video) may be used by the College and/or SC State Technical College System for public relations, marketing and/or publications. I understand that if I do not wish to have my images used for these purposes, I must file a written request available through the Public Relations office (Beaufort Campus). Please refer to the TCL catalog for further details about directory information.

Required Signature
By signing the ECCO application, I certify that the information provided is true and accurate to the best of my knowledge. I understand that submitting incomplete or false information may invalidate my ECCO admission and/or ECCO enrollment.

Signature_____________________________________________  Date__________________________

9. ADDITIONAL INFORMATION
I am applying for admission at TCL in the ECCO program in order to: (Circle all that apply)

- Learn skills for employment
- Plan to earn two-year degree

- Plan to earn a certificate or a diploma
- Undecided

- Transfer to a four-year college

- Improve skills (English, Math, Reading, etc.)

- Do not plan to pursue a college education

Did either of your parents receive a four-year (Bachelor’s) degree?  Yes  No

How did you hear about the ECCO program? (Circle all that apply)

- Newspaper Ad  TV Ad  Friend  Course Schedule  Direct Mail  Website
- Radio  Family  Flyer  Teacher  Guidance Counselor
- Other______________________________

TCL is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award associate degrees. 1866 Southern Lane, Decatur, Georgia 30033-4097, T: 404.679.4500

Statement of Non-Discrimination
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