



University of North Texas (UNT) & Dallas County Community College District (DCCCD) Admission Partnership Agreement — Eagle Bound Program Application (Please type or print clearly)

Date of Birth:	UNT Student ID #:		
Expected Major:	Email Address:		
Full, Legal Name:			
Mailing Address:			
City:	State:	:	Zip Code:
Country of Citizenship:	Phone:		
Term/Year You Expect to Enter UNT: Fall	Spring	Summer	Maymester
FERPA Statement: Under Federal legislation, namely the Family Education records cannot be released without my written permission. I author academic records from the UNT to DCCCD, in order to share stude understand that I do have the right to rescind this release agreeme Dallas County Community College District (DCCCD) requirements upon completion of studies at DCCCD or who contransferrable hours and a 2.00 grade point average will receive Program within the first year of enrollment at DCCCD. This for official & student, prior to submitting to UNT. In order to enroll in classes at UNT, the student must be common Application (www.applytexas.org) and submit Students transferring directly from DCCCD to UNT they would have had if the date of attendance at the universit All requirements of the chosen catalog must be met within eight lagree that my student records may be shared between University.	rize the release of not data information int of my academic in the students who more properties the [Name of the substitution of the students	between the two institutecords, once a UNT student the University of Ne of the Associate] deg ssion to UNT. Student completed and signed ubmit (by UNT's adminic credentials require choice of catalog degree as the dates of attestalog's publication.	m DCCCD to UNT, and the release of my ions without the violation of FERPA. I dent. orth Texas (UNT) admissions gree at DCCCD with at least 45 s should apply for the Eagle Bound d by the appropriate DCCCD assion deadline) the TRANSFER red for admission, to UNT. signating degree requirements as indance at the community college.
STUDENT SIGNATURE:			DATE:
Dallas County Community The above named DCCCD student is hereby acknowledge forth in the Admission Partnership Agreement between U	d for participation		
DCCCD Official SIGNATURE:			DATE: