

**POST-SECONDARY ENROLLMENT OPTION**  
**APPLICATION FOR ADMISSION**



**DAKOTA COUNTY**  

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**TECHNICAL COLLEGE**

**PSEO APPLICATION DEADLINE**

*FALL SEMESTER.....JUNE 1<sup>ST</sup>*

*SPRING SEMESTER.....DECEMBER 1<sup>ST</sup>*

**OFFICE OF ADMISSIONS**

1300 145TH STREET EAST, ROSEMOUNT, MN 55068

E-MAIL: [ADMISSIONS@DCTC.EDU](mailto:ADMISSIONS@DCTC.EDU) | WEB SITE: [WWW.DCTC.EDU](http://WWW.DCTC.EDU) | PHONE: 651-423-8000

TOLL-FREE: 877-937-3282 | TTY: 651-423-8621 | FAX: 651-423-8775

# ADMISSIONS REQUIREMENTS AND CRITERIA

## Admissions Requirements

The requirements listed below must be met by June 1<sup>st</sup> for Fall Semester and December 1<sup>st</sup> for Spring Semester

— **PSEO applicants must be in the upper 1/3 of their junior class or upper 1/2 of their senior class.** If a PSEO applicant does not meet the class rank requirements, they must achieve qualifying scores on the ACCUPLACER Test, have at least a 2.0 G.P.A. and meet with an admissions counselor. The PSEO Admissions Committee will review scores and high school transcript for a final decision.

Qualifying ACCUPLACER Test Scores: Reading Comprehension - 76+, Sentence Skills - 86+, Mathematics Skills - 56+

— **Attend a Tuesday Campus Visit.** Campus visits are held every Tuesday at our Rosemount campus. Whether you are exploring your options or just beginning the application process, the visit gives you the opportunity to gather information about the college, admissions requirements and financial aid. You can also tour our campus and take a look at our classrooms, labs and shops. **No reservation is required. Please check in by 12:45 p.m.** The visit will conclude around 2:30 p.m. **Attending a Tuesday Campus Visit is not required, but highly recommended.**

For those unable to visit on Tuesdays, appointments can be made by calling 651-423-8537 or toll-free 877-937-3282 ext. 8537.

— **Submit the PSEO application for admission.** The attached form is DCTC's PSEO application for admission. Complete both sides of the form making sure you provide your signature. Detach the form and either mail it, hand it in at campus visit, or drop it off in the Office of Admissions. **Apply online at <http://dctc.edu/go/pseo>.**

— **Complete the ACCUPLACER Test.** ACCUPLACER testing is available on a walk-in basis Monday-Friday. Call 651-423-8000 or visit <http://dctc.edu/go/accuplacer> for the testing schedule.

— **Complete an immunization form.** (Available at Campus Visit, from Admissions, or online) The State of Minnesota requires colleges to have knowledge of students' immunization records. Applicants to DCTC are required by law to supply this information and make it available for review by the Minnesota Department of Health. **This form is available online at <http://dctc.edu/go/admissions>.**

— **Submit a high school transcript.** This can be submitted with the completed application for admission.

— **Submit PSEO Program Notice of Student Registration form signed by your high school counselor.**  
This can be submitted with the completed application for admission.

## Admissions Criteria

1. All PSEO students shall be enrolled on the basis of space and/or other appropriate defined local standards and procedures.
2. All PSEO students are expected to perform to the standards to which the institution's non-PSEO students are held accountable.
3. PSEO students must maintain a 2.0 college G.P.A.
4. PSEO students shall not enroll in developmental courses (numbered below 1000).
5. PSEO students with an Individual Education Plan (IEP) are not eligible for support services under PSEO without a prior arrangement between DCTC and the student's school district. Questions regarding support services should be directed to the Disability Services Office at 651-423-8469.

*The Post-Secondary Enrollment Options (PSEO) program was established as a means to "promote rigorous educational pursuits and provide wider variety of options for students." (Minnesota Statute 124D.09) Dakota County Technical College provides opportunities for students to participate in the PSEO program and has established the above criteria/requirements for enrollment into the program.*



SEND COMPLETED APPLICATION TO:  
**OFFICE OF ADMISSIONS**  
 1300 145TH STREET EAST, ROSEMOUNT, MN 55068  
 PHONE: 651-423-8000 | TOLL-FREE: 877-937-3282

## PSEO APPLICATION FOR ADMISSION

**Directions:** Complete this application to apply for admission to Dakota County Technical College.

- Please print or type. Complete the form accurately; misrepresentation of application information is sufficient grounds for cancelling admission or refusing acceptance.
- Include your high school transcripts and your PSEO Program Notice of Student Registration form.
- Sign the application and mail it to the Office of Admissions.

**Note:** You are not legally required to provide the information the college is requesting; however the college may not be able to effectively process your application if you do not provide sufficient information. With some exceptions, unless you consent to further release of private information, access to this information will be limited to school officials, including faculty who have legitimate educational interests in the information. Under certain circumstances, federal and state laws authorize release of private information without your consent:

- to other schools in which you seek or intend to enroll, if you are first notified of the release;
- to federal, state, or local officials for purposes of program compliance, audit, or evaluation;
- as appropriate in connection with your application for, or receipt of, financial aid;
- to your parents, if your parents claim you as a dependent student for tax purposes;
- if the information is sought with a subpoena, court order, or otherwise permitted by other state or federal law, and
- to an institution engaged in educational research of an accrediting agency.

DCTC abides by the provisions of Title IX, federal legislation forbidding discrimination on the basis of sex, race, color, national origin or handicap and all other state and federal laws regarding equal opportunity. This document is available in alternative formats to individuals with disabilities by calling 877-937-3282 or TTY: 651-423-8621.

## PERSONAL DATA

Name (Last, First, Middle)

Date of Application

Name used in high school records or in other educational records and transcripts if different from above (Optional) (Last, First, Middle)

Social Security Number

*Many colleges/universities use social security numbers for student identification purposes on student records. Providing your Social Security number is voluntary. If you do not provide this number, your application will still be processed. This data is requested for purposes of administration, program evaluation and consumer and alumni data. Your number also may be used to create summary information about MnSCU programs through data matches with other state agencies.*

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Current Mailing Address (House/Apt. Number, Street, P.O. Box/Rural Route)

City

State

ZIP Code

County

Permanent Address, If Different From Above (Street, P.O. Box/Rural Route)

City

State

ZIP Code

County

Home Phone

Cell Phone

E-mail Address

(    )

(    )

Are you a resident of Minnesota?

If yes, how long?

If no, what state are you a resident of?

YES    NO

years \_\_\_\_\_ months \_\_\_\_\_

Are you a U.S. citizen?

Are you a Permanent Resident?

YES    NO   If not, type of visa \_\_\_\_\_

Refugee    Resident Alien    Other \_\_\_\_\_

*(International students and non-immigrants must complete a separate application form.)*

## ADMISSIONS DATA

Name of program, major, or curriculum you plan to follow (e.g. automotive technology, nursing, graphic design, etc.)

What is your current educational intent at Dakota County Technical College?

- Earn an certificate       Earn an associates (two-year) degree       Complete courses but not a degree  
 Earn a diploma       Earn an associates (two-year) degree and transfer       Complete courses and transfer without a degree

What term do you intend to begin taking courses? (Check One)     Fall     Spring    Year \_\_\_\_\_

Do you plan to attend:     Full-time? (12 or more credits)     Part-time? (fewer than 12 credits)

## REQUEST FOR DEMOGRAPHIC INFORMATION

Providing the following information is voluntary, and will assist Minnesota State Colleges and Universities in evaluating student recruitment and retention policies; it will not be used as a basis for admission.

Gender:     Male     Female

Are you Hispanic or Latino (a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture, regardless of race)?

YES     NO

Race and ethnic background (select any that apply)

- American Indian or Alaska Native - origins in any of the original peoples of North, Central or South America and who maintains tribal affiliation or community attachment  
 Asian - origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent  
 Black or African American - origins in any of the black racial groups of Africa  
 Native Hawaiian or Other Pacific Islander - origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands  
 White - origins in any of the original peoples of Europe, the Middle East or North Africa

What is the highest level of education for your parent(s)/guardian(s)?

Please respond for the parent(s), step-parent(s), adoptive parent(s), or guardian(s) who raised you. Check only one box for each parent/guardian.

Parent/Guardian #1

No high school diploma     High school diploma     Some college     Two-year college degree/diploma     Bachelor's degree or higher     Not sure

Parent/Guardian #2

No high school diploma     High school diploma     Some college     Two-year college degree/diploma     Bachelor's degree or higher     Not sure

## EDUCATIONAL DATA

High school graduation date \_\_\_\_\_

High school attending \_\_\_\_\_  
City State ZIP Code

## SIGNATURE

I understand the PSEO admission requirements as outlined in this document. I understand it will be my responsibility to return textbooks and materials to DCTC. I further understand that I am not guaranteed courses and will not be eligible for financial aid. All of the information included is true and complete to the best of my knowledge.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's Signature (if applicant is under 18 years of age) \_\_\_\_\_

Date \_\_\_\_\_