

School Consent Form

Terra State Community College



This form must be completed and returned to Terra State with the most current, unofficial high school transcript before student's enrollment will be approved.

Name _____ School Year _____
Last First Middle Initial

Applicant is:

- A new College Credit Plus student
- A continuing (*returning*) College Credit Plus student

Phone: _____
Local School: _____
Tech Prep (if applicable): _____

Applicant's class status for the year they plan to participate in College Credit Plus

- Senior
- Junior
- Sophomore
- Freshman
- 8th
- 7th

The applicant and parent/guardian verify that the information given above is complete and accurate to the best of their knowledge. The applicant gives permission to the College to release academic information, orally or in the form of written record, concerning their enrollment, grades, schedule, attendance, and behavioral conduct to high school personnel and parents/guardians.

I agree to abide by all policies, regulations, and procedures of the College, including contacting guidance counselors and College advisors to process any scheduling and/or academic changes.

Signature of Applicant Date

Signature of Custodial Parent/Guardian Date

Parent Email (*this email will be only used by CCP Advisors for communication and updates*)

This section to be completed by high school counselor.

Applicant's SSID (**REQUIRED**): _____ Has Applicant taken the ACT? Yes No
(If yes, please include a copy of their scores with the application)

Applicant's current high school cumulative GPA _____
(This will be confirmed with the submission of an unofficial transcript from the high school)

Where does Applicant intend to take classes? On Campus Online Both At local school (*if applicable*)

List courses applicant is interested in completing at Terra State Community College

Course Preference List	High School Graduation Requirement (yes/no)
_____	_____
_____	_____
_____	_____
_____	_____

I verify the above information to be accurate to the best of my knowledge.

Signature of High School Counselor

Date

