

START COLLEGE NOW APPLICATION

I. STUDENT INFORMATION <i>This section completed by student / parent</i>								
Student Name <i>First, Middle, Last</i>					Student's Birthdate <i>Mo./Day/Yr.</i>		Gender M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/>	
Parent/Guardian Name <i>First, Last</i>					Preferred Name/Pronouns		Ethnicity	
Address <i>Street, City, State, Zip, County</i>								
Student Phone <i>Area/No.</i>			Student Email (<i>Provide an active email address for password resets</i>)					
Parent/Guardian Phone <i>Area/No.</i>			Parent/Guardian Email			Parent(s) highest education level		
High School Student Attends & Projected Graduation Year					School District in Which Student Resides			
Technical College to Which You Are Applying to					Grade Student Will be in When Taking These Courses <input type="checkbox"/> 11 <input type="checkbox"/> 12		Number of College Credits Earned to Date	
Semester for which applying: <input type="checkbox"/> Spring 20____ <input type="checkbox"/> Fall			Do you/have you ever identified as a foster youth? (<i>this field is optional</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No			II. BOARD ACTION <i>Completed by HS district</i>		
Check if Distance Learning	Check if Alternate	Technical College Course Name	Technical College Course Number	No. of College Credits	Comparable HS Course Offered?		Approved for HS Credit	No. of HS Credits
Yes	No				Yes	No		
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
III. STUDENT & PARENT / GUARDIAN SIGNATURES <i>This section completed by student / parent</i>								
STUDENT SIGNATURE—IN SIGNING THIS DOCUMENT, I acknowledge the following: <ul style="list-style-type: none"> I understand and will comply with the assurances and conditions outlined in "Student/Parent Specific Responsibilities" and Subchapter 38.12 (14). I authorize the high school and technical college to share course and grade information. 								
Student Signature Required							Date Signed <i>Mo./Day/Yr.</i>	
➤								
PARENT/GUARDIAN SIGNATURE—Required if student is under 18. <ul style="list-style-type: none"> I understand and will comply with the assurances and conditions outlined in "Student/Parent Specific Responsibilities" and Subchapter 38.12 (14). I authorize the high school and college to share course and grade information. 								
Parent/Guardian Signature Required							Date Signed <i>Mo./Day/Yr.</i>	
➤								

TEXTBOOK RELEASE

I authorize textbooks that are billed to a third party to be released to the parent or guardian identified on this application.

Student Initials: _____

IV. STUDENT NAME <i>This section completed by student / parent</i>			
Student Name <i>First, Middle, Last</i>			
V. HIGH SCHOOL BOARD APPROVAL <i>This section completed by district</i>			
Named student is approved to enroll for courses marked "Approved" in Section III: <input type="checkbox"/> Yes <input type="checkbox"/> No. <i>If no, indicate reason for denial:</i>			
<input type="checkbox"/> Check if student has a record of disciplinary issues.			
Name of High School Board Approval Authority			Phone <i>Area/No.</i>
High School Board Approval Authority Signature 			Date Signed <i>Mo./Day/Yr.</i>
VI. TECHNICAL COLLEGE APPROVAL <i>This section completed by college</i>			
Name of Course(s) in Which Student is Enrolled	Course Code(s) / Number(s)	No. of College Credits	District Approved?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Eligible to enroll	I CERTIFY that the above-named student is eligible to attend the course(s) listed in Section VI and that all these courses are nonsectarian in content. The student will be notified of college admission policies/criteria and record disclosure provisions. The technical college agrees to provide the school district with grade information (and attendance information upon request).		
<input type="checkbox"/> Not eligible to enroll	I CERTIFY that the above-named student is not eligible to enroll in and/or attend the course(s) listed in Section VI. The student will be notified of the reasons for ineligibility.		
Name of Technical College Representative and Title		Phone <i>Area/No.</i>	Email
Technical College Representative Signature 			Date Signed <i>Mo./Day/Yr.</i>
VII. APPEALS			
Appeals of school board decision: A student may appeal a school board decision regarding awarding of high school credit or course comparability to the State Superintendent within 30 days of the board's decision.			