GREAT BAY COMMUNITY COLLEGE (GBCC)

ENROLLMENT FORM –

STUDENT

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Please fill out this form and take it with you to Great Bay Community College Present it to the One Stop along with your signed, course registration form

Participating Student Last Name			First Name		Middle Name	
Date of Birth: MM/DE	D/YYYY	Home Phone			Email	
Grade Level: 1	1 th 12 ^t	h Goal College:	Goal Career:			
			Anticipated Graduation Date:///			
High School Name			·			
Type of School: Public High		ic High School	Private School		Home School	
GBCC term student is scheduled to attend:			Fall	Spring	Summer	Year:
High School Coun	selor reco	mmended GBCC cou	urse(s):			

- 8. The undersigned parent/guardian hereby grants permission for participating student to enroll in the above listed courses at the specified CCSNH College.
- 9. We represent that the participating student though not yet 18 years of age is sufficiently mature to manage a college campus environment and participate in college level courses.
- 10. The undersigned parent/guardian understands that the Family Education Rights and Privacy Act (FERPA) governs all college education records and allows release of academic information, including grades, to the student only, regardless of age. Academic information cannot be released to parents or third parties without the written consent of the student.
- 11. We understand and agree that the College will treat the participating student as an adult; that we have had a reasonable opportunity to consider the risks of a minor student participating in the adult and independent learning environment of the College, including all risks of related to entering onto a campus where supervision is not provided and engaging in coursework that may include adult themes,8agitin and

For Office Use Only:	

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