

**Underage Student
Enrollment Application
Permission Form**

Student's Name:

Date of Birth:

Current School Name:

Recommender's Name:

Title:

Telephone:

City College Campus:
(please check one)

Richard J. Daley

Kennedy-King

Malcolm X

Olive-Harvey

Harry S Truman

Harold Washington

Wilbur Wright

Enrollment Term:

Course Name:

Course Number:

Credit Hours:

I understand that the City Colleges of Chicago is primarily an adult learning environment and if approved to take courses through this Special Admissions application that I may be exposed to course materials and discussion content that is purposed for mature audiences as it relates to the educational goals of the classroom. I will be expected to participate in class and follow the same academic policies and procedures as all other enrolled students.

If I wish to withdraw from courses, I must follow proper procedure or risk receiving a failing grade. All grades assigned for courses at CCC are part of my permanent college record and must be reported to requesting institutions (i.e. for high school transcripts, when applying to another college or job application, etc.)

If I am taking the course at the college or dual enrolled, I understand that an adult guardian must stay in the building when I am in class, but may not enter the classroom.

If I am taking the course at my high school as dual credit, I understand the permission was granted because I have received recommendation from my high school and approval from the college President.

I understand that the campus Dean of Instruction has the right to limit the number of courses I may take within a semester and to direct me into specific sections of courses based on my placement scores. I must obtain the Dean of Instruction's approval before registering for a new course.

Student Signature

Date

Guardian's Signature

Date

Recommender's Signature

Date

College Approval

FOR OFFICE USE ONLY