


# **COLLEGIATE HIGH SCHOOL at Northwest Florida State College**

A Charter School of the Okaloosa County School District

APPLICATION FOR ADMISSION  
2017-2018 SCHOOL YEAR

FORMS AND INFORMATION  
TO BE SUBMITTED FOR ADMISSIONS  
CONSIDERATION



**Complete  
and return this  
entire packet to  
the Collegiate  
High School**

*An Equal Access/Equal Opportunity Institution*

# COLLEGIATE HIGH SCHOOL at NWFSC

Thank you for your interest in the Collegiate High School at Northwest Florida State College (NWFSC). This packet contains the forms necessary for application to the charter school. All of the Section I Application Items (see the application checklist on page five) are in this packet.

Please read each form carefully and complete all information as appropriate. Be sure that all required signatures are completed as well.

Please note the office will be closed for the holidays from December 16, 2016, through January 2, 2017, and from March 13 – 17, 2017.

 **If you have questions or need additional information, please consult our Website at [www.nwf.collegiatehigh.org](http://www.nwf.collegiatehigh.org) or call the Collegiate High School Office at (850) 729-4949.**

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**COLLEGIATE HIGH SCHOOL at NWFSC 2017-2018 ADMISSIONS PROCESS**

**Primary Application Period: February 1, 2017, through February 28, 2017**

1. Starting February 1, 2017, completed applications will be stamped with the date received at the Collegiate High School office between 8 a.m. - 4:00 p.m., but a completed application received with an earlier February date will have no advantage over a completed application received with a later February date.
2. Applications received on or before 4:00 p.m., February 28, 2017, will be treated as the initial set of applicants. If the number of eligible applicants does not exceed the capacity of the program, class, grade level or building, all eligible applicants will be admitted.
3. If the number of eligible applicants exceeds the capacity of the program, class, grade level or building, eligible applicants shall have an equal chance of being admitted through a random lottery.
4. If a lottery is necessary, it will be held at 5:00 p.m. on Thursday, March 9, 2017, at the NWFSC Niceville Campus in room 140 of the Collegiate High School (building 340).
5. The names of all eligible applicants participating in the random selection process and not admitted to the charter school will be placed on a waiting list in the order that the name was drawn in the lottery.
6. Once the applicant has been admitted to the school and has accepted the invitation to enroll, he/she is not required to apply to the school for future enrollment periods unless the student has officially declined to enroll or has officially withdrawn from the Collegiate High School at NWFSC.

**Secondary Application Period: March 1, 2017, through March 31, 2017**

**(The Collegiate High School and Northwest Florida State College  
will be closed March 13 – March 17, 2017 for Spring Break)**

1. Students whose applications are received on or before 4:00 p.m., March 31, 2017, will be treated as the second set of applicants. If the combined number of eligible applicants in the primary and secondary application periods does not exceed the capacity of the program, class, grade level or building, all eligible applicants in the secondary application period will be admitted.
2. If, in combination with the number of applicants admitted in the primary application period, the number of eligible applicants exceeds the capacity of the program, class, grade level or building, eligible applicants in the second applicant pool shall have an equal chance of being admitted through a lottery.
3. If a lottery is necessary, it will be held at 5:00 p.m. on April 6, 2017, in room 140 of the Collegiate High School (building 340) on the NWFSC Niceville Campus.
4. The names of all eligible applicants participating in the random selection process and not admitted to the charter school will be placed on a waiting list in the order that the name was drawn in the lottery.
5. Once the applicant has been admitted to the school and has accepted the invitation to enroll, he/she is not required to apply to the school for future enrollment periods unless the student has officially declined to enroll or has officially withdrawn from the Collegiate High School at NWFSC.

**COLLEGIATE HIGH SCHOOL at NWFSC**

**APPLICATION PROCESS FOR THE 2017-2018 ACADEMIC YEAR**

**Applications will be accepted in two specific application periods, followed by a general application period.**

<b>Primary Application Period:</b>	<b>February 1, 2017, through 4:00 p.m. on February 28, 2017</b>
<b>Secondary Application Period:</b>	<b>March 1, 2017, through 4:00 p.m. on March 31, 2017</b>
<b>General Application Period:</b>	<b>April – December 2017</b>

***Application Steps***

1. Attend one of the information sessions offered in December 2016 and January 2017 (encouraged, but not required). Application packets will be available at the information sessions. An overview of the school mission, programs and services will also be provided. **Information sessions on the Niceville campus are scheduled for Tuesday, December 6, 2016, and Thursday, January 12, 2017. These two sessions will be at 5:30 p.m. in rooms 132/133 (first floor) of the Student Services building on the NWFSC Niceville campus. Another session will be held on Monday, December 5, 2016, at 5:30 p.m. in Crestview at the Crestview Public Library.**
2. Obtain a Collegiate High School application packet.
  - Pick up an application packet at the Collegiate High School Office on the NWFSC Niceville Campus, Building 340 or at the admissions/registration site on any one of the NWFSC campuses or centers
  - Request an application packet be mailed to you by calling 729-4949.
  - Download the application packet and instructions from the Collegiate High School web site at [www.nwfcollegiatehigh.org](http://www.nwfcollegiatehigh.org).
3. Once the initial application period begins on February 1, 2017, **deliver *official student transcripts that include the final Fall 2016 semester grades*** and the enrolled courses for spring semester to the Collegiate High School Office (NWFSC Niceville Campus), 100 College Blvd. E, Building 340, Niceville FL 32578.
4. Submit current official ACT, SAT, or college placement testing by the Postsecondary Education Readiness Test (PERT) scores to the Collegiate High School Office. Test scores are valid only if earned within the last two years. PSAT scores cannot be used for charter school admissions. Students without current placement scores, or who wish to test/retest may arrange to take the PERT by calling 729-6016.
5. Submit the completed application packet to the Collegiate High School Office no earlier than February 1, 2017, and no later than 4:00 p.m. on Tuesday, February 28, 2017, (office hours are 8 am – 4 pm, Monday – Friday) for consideration in the primary application period. Applications received after that time will be considered in the secondary application period. Submit the completed application packet to the Collegiate High School Office, no later than 4:00 p.m. on Friday, March 31, 2017, for consideration in the secondary application period. Applications will continue to be accepted in the general application period of April to December 2017 for both first and possible second semester openings and applicants enrolled or placed on a waiting list as openings allow.

Deliver (preferred) or mail the application packet to the  
Collegiate High School at NWFSC Office, Building 340  
100 College Boulevard, E  
Niceville, FL 32578

**NOTE: Applicants will be eligible for admission only if a completed application has been received by the Collegiate High School by the dates specified in item 5 above. An application is complete only if ALL application documents, with all appropriate signatures have been received by the established deadline. It is the responsibility of the applicant to ensure completion of the application.**

# COLLEGIATE HIGH SCHOOL at NWFSC

## Application Checklist and Requirements

The items listed below comprise the full Collegiate High School Application. All items are required for eligibility for admission to the school, regardless of the student's program. In order to receive consideration in the admission process, all components listed must be completed and received by the established deadlines. All forms should be submitted at one time; transcripts and placement scores may arrive separately.

### Section I.

**Submit the following forms, complete with appropriate signatures, to the Collegiate High School Office in one package (All forms are in the "Forms and Information to Be Submitted" section of the application materials.)**

- Collegiate High School Participation Agreement
- Student Information Data Entry Form
- Student Health Information Form  
In addition, the **Certificate of immunization** for poliomyelitis, diphtheria, rubella, rubeola, pertussis, tetanus, varicella (PK-02), hepatitis B (PK-05 & 07-12) and mumps DH FORM: DH680A or DH680A & B (Grade 7-12) is required if the student is **not** currently enrolled in the Okaloosa or Walton County Public School System. For current public school students, health and immunization status should appear on the high school transcript)
- Social Security Number Verification Form
- English for Speakers of Other Languages/ Intensive English Education Form
- Report of Previous Expulsions, Arrests, Juvenile Justice Actions

### Section II.

**Submit the following information to the Collegiate High School at NWFSC Office.**

- Official High School Transcripts from all high schools attended (must include the completed Fall 2016 semester and the enrolled courses for the Spring 2017 semester).  
\_\_\_ Transcripts will be/were hand delivered
- Official College Transcripts (if applicable)  
\_\_\_ Transcripts will be/were hand delivered
- Official ACT, SAT or PERT Scores  
\_\_\_ Please use PERT scores on record at NWFSC  
\_\_\_ ACT/SAT Scores submitted separately

Submitted by \_\_\_\_\_

Date \_\_\_\_\_

Received for Collegiate High School by \_\_\_\_\_

Date \_\_\_\_\_

## **2017-2018 PARTICIPATION AGREEMENT**

The Collegiate High School at NWFSC exists for the purpose of educating students in a rigorous academic environment. We are pleased that you have made this academic choice and encourage your participation to the fullest in this educational experience. To assure understanding of policies and procedures regarding conduct, curriculum, and communication and attendance, you are asked to read the following and indicate your understanding and acceptance.

*By my signature below I acknowledge the understanding and acceptance of the following:*

1. I understand that as a Collegiate High School Student at NWFSC (Dual Enrollment Collegiate or Pre-collegiate) I will be enrolled for some or all of my classes in college credit courses and that the depth, breadth, rigor and pace of these courses will be at the college level.
2. I understand that Collegiate High School students in college level courses are subject to the same standards, policies, and responsibilities as other college students unless otherwise restricted by federal, state or local requirements.
3. I understand that curriculum content, evaluation, and selection of appropriate instructional materials are the prerogative of the college instructor and will not differ for dually enrolled Collegiate High School students from that presented for traditional college students.
4. I understand that NWFSC is an open campus and that I will be attending classes with non-high school aged students and that I may encounter students of a variety of ages and backgrounds while on the NWFSC Campus.
5. I understand that the Collegiate High School Principal or the Assistant Principal is the first point of contact for parents who wish to discuss academic progress in a course, schedule a conference, or request information about school or classroom activities.
6. I understand that attendance at an annual orientation/scheduling session is required for each student.
7. I understand that attendance at an annual orientation/scheduling session is required for the parent(s)/guardian(s) of each student.
8. I understand that parent and student will attend all Student-Led Conferences.
9. I understand that, if selected for admission to the Collegiate High School, I must agree to abide by all Collegiate High School at NWFSC policies and procedures including but not limited to the Student Code of Conduct, Pupil Progression Plan, attendance policies and discipline policies, as well as to applicable college policies.
10. I understand that completion of high school graduation requirements does not guarantee completion of an AA or AS degree. To receive an AA or AS degree, I understand that a student must meet all program requirements identified in the NWFSC College Catalog at the time of the student's initial admission.
11. I understand that I will be expected to sign an agreement outlining my responsibility for all instructional materials, textbooks, and equipment issued to me.
12. I agree to attend school regularly (see that my child attends regularly) and understand that I must be present for at least 1500 minutes of instructional time each week. This requirement will be fulfilled through a combination of instructional activities in college classes, high school classes and the learning labs.

13. I agree to attend school regularly, and I understand that I must be enrolled in a full time load for each session. This requirement will be fulfilled through a combination of instructional activities in college and high school classes.
14. Collegiate High School at Northwest Florida State College is an open campus environment. Students in grades 11 and 12 are fully engaged in college course work with varying time commitments to their course work. Understanding my (my child's) needs to arrive and leave the campus at different times, I fully understand that Collegiate High School at Northwest Florida State College, its officers, trustees, employees, and agents are released from all liability, claims of demands for any damage, loss or injury to me my property, or parent's property in connection with my actions. Students in grade 10 are expected to remain on campus during the regular school day hours and are **not** allowed to leave campus.
15. I understand that registering my daily attendance at school in accordance with my official Collegiate High School schedule is my responsibility and that I may be counted absent if I fail to register my attendance daily in accordance with the prescribed attendance plan. Official daily attendance is recorded when I swipe my Student ID card upon arriving and leaving campus. If the Student ID card is unavailable, attendance must be registered manually through the front office. The ID card must be replaced at my cost within one week after the first failure to use the automated system.
16. I understand participation in an Academic Seminar is required for every student each year and that successful completion of a Capstone Project is the Academic Seminar component required of every senior to meet the Collegiate High School high school graduation requirements.
17. I understand Collegiate High School students may continue to participate in extra-curricular activities, such as band and sports teams, at their regional public high school if these activities do not interfere with the student's academic classes.
18. I understand that while the mission and purpose of the Collegiate High School is to provide accelerated instruction and college level curriculum to motivated students, if my overall college or high school grade point average falls below 2.0 or if I fail to make adequate progress on the path to graduating from high school on time, I will be enrolled in courses for high school credit only or college classes to achieve grade forgiveness in order to improve my GPA and my progress toward the high school diploma.

\_\_\_\_\_

Print Name of Student

\_\_\_\_\_

Student signature

\_\_\_\_\_

Date

\_\_\_\_\_

Print Name of Parent/Guardian

\_\_\_\_\_

Parent/Guardian signature

\_\_\_\_\_

Date

**COLLEGIATE HIGH SCHOOL at NWFSC**

**Student Information Data Entry Form**

**STUDENT INFORMATION**

Legal Name: \_\_\_\_\_  
(First) (Middle) (Last) (Suffix)

Preferred Name: \_\_\_\_\_ Fall 2017 Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Sex: \_\_\_\_\_  
(Must be accurate and must belong to student; you may also choose not to provide, see page 12))

CITIZENSHIP: \_\_\_ U.S. Citizen \_\_\_ Resident Alien Resident Alien # \_\_\_\_\_

Country of Citizenship (if not U.S.) \_\_\_\_\_ International Student (Attach copy of VISA or PRA card)  
(If not US citizen, please provide a copy of resident documentation at time of application)

RACE : *Please check ALL that apply* (Racial categories are defined by the State of Florida Department of Education)

- |   |   |
|---|---|
| <input type="checkbox"/> White                  | <input type="checkbox"/> American Indian/Alaskan Native   |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Hawaiian/Pacific Islander  |
| <input type="checkbox"/> Asian                  | <i>Ethnicity:</i> Is student Hispanic or Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No |

**HOME ADDRESS (Student Residence)** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Unlisted (Y/N)?: \_\_\_\_\_

**MAILING ADDRESS (if different than home address):**

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**If the student is currently enrolled in any of the following, please check:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Title I          | <input type="checkbox"/> Gifted                             | <input type="checkbox"/> Mentally Handicapped    |
| <input type="checkbox"/> Autism Spectrum  | <input type="checkbox"/> Visually Impaired                  | <input type="checkbox"/> Emotionally Handicapped |
| <input type="checkbox"/> Speech/Language  | <input type="checkbox"/> Physically Impaired                | <input type="checkbox"/> Orthopedically Impaired |
| <input type="checkbox"/> Hearing Impaired | <input type="checkbox"/> Specific Learning Disability (SLD) | OTHER: _____                                     |



**NAME OF LAST SCHOOL ATTENDED:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Has the student ever attended a Florida school before (Y/N)? \_\_\_\_\_

If yes, which county? \_\_\_\_\_ Last year attended: \_\_\_\_\_

**CONTACT INFORMATION**

Student Cell Number: \_\_\_\_\_

With whom does the student live? \_\_\_\_\_

**PARENT/GUARDIAN NAME #1:** \_\_\_\_\_

Does parent/guardian#1 have custody? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can parent/guardian#1 pick student up from school? \_\_\_\_\_ Yes \_\_\_\_\_ No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**PARENT/GUARDIAN NAME #2:** \_\_\_\_\_

Does parent/guardian#2 have custody? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can parent/guardian#2 pick student up from school? \_\_\_\_\_ Yes \_\_\_\_\_ No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**EMERGENCY CONTACT NAME (other than parent):** \_\_\_\_\_

Can emergency contact pick student up from school? \_\_\_\_\_ Yes \_\_\_\_\_ No

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact Phone - Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

**IS EITHER PARENT IN A UNIFORMED MILITARY SERVICE (Y/N)?** \_\_\_\_\_

If yes, please give the following information:

Name \_\_\_\_\_

Social Security Number (optional): \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Rank: \_\_\_\_\_ Base: \_\_\_\_\_

Squadron Phone Number: \_\_\_\_\_ Squadron: \_\_\_\_\_

**IS EITHER PARENT EMPLOYED ON FEDERAL PROPERTY? (Y/N):**

If yes, please give the name of the federal property on which employed:

\_\_\_\_\_

\_\_\_\_\_

**PLEASE LIST OTHER CHILDREN IN THE FAMILY 18 YEARS OR YOUNGER:**

Name	Age	School Attending (If any)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**COLLEGIATE HIGH SCHOOL AT NWFSC**

**STUDENT HEALTH INFORMATION**

Florida Statutes require that each child who is entitled to admittance to kindergarten or any other initial entrance in to a Florida public school must present certification of a school entry medical examination performed within the twelve months prior to enrollment in school.

A child shall be exempt for the requirement upon written request of the parent/guardian, stating objections on religious grounds. A form certifying the same may be obtained from the charter school office. The exemption form will be placed in the student's records.

**PLEASE COMPLETE THE FOLLOWING:**

Name of Student \_\_\_\_\_

Date of Last Exam \_\_\_\_\_ Current Doctor \_\_\_\_\_ Telephone \_\_\_\_\_

Does the student have any allergies?       No                       Yes If yes, please specify below  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the student have any serious/chronic illness?  
(epilepsy, asthma, heart problems, etc)       No                       Yes If yes, please specify below  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the student need medication(s)?       No                       Yes If yes, please specify below  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Immunization Requirements for Entrance**

- A. Certificate of immunization for poliomyelitis, diphtheria, rubella, rubeola, pertussis, tetanus, varicella (PK-02), hepatitis B (PK-05 & 07-12) and mumps DH FORM: DH680A or DH680A & B (Grade 7-12)
- B. Certificate of exemption for religious reasons. DH FORM: DH 681
- C. Certificate of exemption for medical reasons. DH FORM: DH 680C
- D. Certificate of 30-day exemption obtained from the Okaloosa County Health Department. DH FORM: DH680B

\_\_\_\_\_  
Signature of Parent/Guardian Date

**COLLEGIATE HIGH SCHOOL AT NWFSC**

**STUDENT SOCIAL SECURITY NUMBER**

Florida Statute 1008.386 **requires** school districts to request the social security number for each student enrolled. No student may be denied enrollment or graduation when a social security number is not provided.

Student Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

**VERIFICATION OF ABOVE INFORMATION**

The student's social security number must be verified by one of the following methods.

1. The social security number card or copy was presented to a school official.

\_\_\_\_\_  
School Official \_\_\_\_\_  
Date

2. Bank statements, insurance records or other similar documents containing the student's social security number were presented to a school official.

\_\_\_\_\_  
School Official \_\_\_\_\_  
Date

3. The parent/guardian verifies the social security number.

I hereby attest that the social security number I have provided for the above named student is accurate.

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_  
Date

**DECLINATION**

I refuse to provide the social security number for the above named student and understand a separate identification number will be assigned to the student for record keeping purposes.

\_\_\_\_\_  
Signature of Parent/Guardian \_\_\_\_\_  
Date

**COLLEGIATE HIGH SCHOOL at NWFSC**

**ENGLISH FOR SPEAKERS OF A SECOND LANGUAGE  
Intensive English Education  
Identification of Student's Primary and Home Language**

CURRENT SCHOOL: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME OF STUDENT: \_\_\_\_\_

GRADE: \_\_\_\_\_ STUDENT NUMBER: \_\_\_\_\_

The U.S. Office of Civil Rights, Department of Health, Education and Florida's CSIH 931-233.058 requires identification of language-minority students by dominant groups.  
This identification is required by the Civil Rights Act of 1964

1. Is a language other than English used in the home?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ (What language?): \_\_\_\_\_
2. Did the student have a first language other than English?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ (What language?): \_\_\_\_\_
3. Does the student most frequently speak a language other than English?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ (What language?): \_\_\_\_\_
4. Has the student received services for English Speakers of Other Languages in the past year?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_ (What language?): \_\_\_\_\_

See Instructions Below for Further Information/Action

If the answer to question 1, 2, and 3 is NO, retain this form in the student's cumulative folder.

If the answer to any one of these questions is YES, the parent/guardian is to read the statement below and sign on the designated line. The Principal or Designee is to also sign this form. Retain a copy for the student's record. The original should then be sent to the ESOL/Intensive English Program Director.

In accordance with Federal and State regulation, the above-named student has been identified as a linguistic-minority student. This form will be forwarded for further assessment and placement.

Print Name \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Completing Survey

Date \_\_\_\_\_

\_\_\_\_\_  
Principal/ Designee

Date \_\_\_\_\_

**COLLEGIATE HIGH SCHOOL at NWFSC**

**Report of Previous Expulsions, Arrests, Juvenile Justice Action  
Acknowledgement of Disruptive or Criminal Behavior**

According to Florida Law (S.232,0205) students are required, at the initial time of registration for school, to report any previous school expulsions, arrests which resulted in a charge, or any juvenile justice actions taken against the student.

**Student Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

1. Has the student ever been expelled from a school?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

2. Has the student ever been arrested and charged?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

3. Has the student ever been placed under Community Service or had any other juvenile Justice actions taken against him/her?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

***If the answer to question 1, 2, and 3 is NO, student and parent please sign on both lines below.***

**If the answer to any of the above questions is YES**, please and state below the specifics of the incident, including dates, crime or cause of expulsion, and outcome (i.e., length of expulsion or program, community service, and cause and conditions of community control) and parent and student sign on both lines below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I attest that the information provided is true.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

I hereby give my permission to the Department of Juvenile justice to release all records regarding my child's involvement with the Department of Juvenile justice or the Collegiate High School at NWFSC.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**ACKNOWLEDGEMENT OF ABOVE INFORMATION TO CLASSROOM TEACHER—FOR SCHOOL USE ONLY**

\_\_\_\_\_  
Teacher Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher Signature

\_\_\_\_\_  
Date