

HIGH SCHOOL APPROVAL *to be completed ONLY by the student's high school academic counselor*

I approve this student's participation in the High School Scholars (HSS) program while concurrently enrolled in high school.

Student Name: _____

Signature of HS Academic Counselor: _____ Date: _____

Print Name: _____

PARENT/LEGAL GUARDIAN APPROVAL

I approve my son/daughter's enrollment in the High School Scholars (HSS) program and understand that, while some state fees are waived, HSS fees are due with the Add Request form(s). I further authorize my son/daughter's high school and/or college to release transcripts, including grades and test scores, to CSU, Chico for the purpose of verifying HSS program and course eligibility. I am aware that some course content may contain mature subject matter, and I consent to my son/daughter's participation in relation to the aforementioned material. I am also aware that it is my responsibility to contact the appropriate faculty member, or instructor of record, prior to course enrollment, to inquire about any concerns related to appropriate course content for my child. I further understand that if enrolled, my son/daughter will hold rights under the federal [Family Educational Rights and Privacy Act \(FERPA\)](#).

Signature of Parent/Legal Guardian: _____ Date: _____

Print Name: _____

EMERGENCY CONTACT INFORMATION - *to be completed by the approving parent or legal guardian*

Emergency Contact Person and Phone: _____

Important medical information CSU, Chico faculty and staff must know about the student: _____

Allergies to medications, drugs or foods: _____

Date of last Tetanus Booster: _____

STUDENT AGREEMENT

MATH course is intended: I have attached the appropriate documentation to be eligible for a math course.

Previous college or university enrollment, other than CSU Chico: I have attached complete unofficial copies of my college or university transcripts.

I verify that I meet all High School Scholar (HSS) program eligibility requirements. I understand that, as a HSS participant, I will be permitted to enroll in courses on a semester-by-semester basis concurrent with my high school enrollment and that participation in this program in no way assures my acceptance to the University as a fully matriculated applicant in the future. I further understand that all courses attempted will become part of my permanent academic record; that I will be held to the same academic standards as regularly-enrolled CSU, Chico students; and that the instructor's approval is contingent upon appropriate space availability in the course(s). (A HSS participant can never take the course space of a regularly enrolled CSU, Chico student.) Additionally, I authorize the release of my high school and/or college transcripts, including grades and test scores, to CSU, Chico for the purpose of verifying my eligibility for the HSS program and proposed courses.

With my signature below, I certify that I have provided complete and accurate responses to all the items on this application. I understand that any misrepresentation or omission may be cause for denial, or cancellation of admission or enrollment.

Signature of Student: _____ Date: _____

A properly completed and signed HSS Application and any other required documentation are due by 5:00 pm on **Friday, January 7, 2022.**

Documents can be emailed to Sarah Wood
at swood16@csuchico.edu