

SPECIAL PERMISSION TO ATTEND CRAVEN COMMUNITY COLLEGE

STUDENT'S NAME SOCIAL SECURITY NUMBER DATE of BIRTH GRADE

Has permission to attend the High School Equivalency Program at Craven Community College.

Student's address _____

_____ Phone # _____

Last school attended _____ Date _____ / _____

School's address _____

Reason for leaving _____

CRAVEN COUNTY students: Parent must obtain the ALTERNATIVE EDUCATION REFERRAL FORM from the guidance department of last school student attended, rather than this permission form.

NORTH CAROLINA students from outside of Craven County or PRIVATE SCHOOL STUDENTS:
The _____ County Board of Education or _____ Private School releases this student to attend Craven Community College's Adult High School or GED program and verifies the above information on school attendance.

*COUNSELOR _____ DATE _____

*PRINCIPAL _____ DATE _____

SUPERINTENDENT (*DESIGNEE) _____ DATE _____

*If given authority by superintendent, sign also for superintendent.

HOME-SCHOOLED students: Parent must sign this form, attach copy of state approval form, and certify that the student has not been enrolled in NC public school for the past six months.

OUT-OF-STATE students: Parent must sign this form; signatures of school officials are unnecessary.

EMANCIPATED students must provide either of the following documentations:

1. A marriage certificate and ID
2. An official emancipation document signed by the courts

Anything other than legal documentation is not acceptable and the student will have to follow the regular process.

REQUIRED FOR ALL MINOR students:

I certify that all information supplied above is accurate and request that he/she be allowed to attend the Craven Community College High School Equivalency Program.

Parent/legal guardian _____ Date _____

(SIGNATURE OF PARENT OR GUARDIAN-to be notarized below by Notary Public)

NOTORIZATION: This is to certify that _____

appeared before me on _____ and expressed a desire for _____,
(DATE) (STUDENT'S NAME)

_____ to attend the High School Equivalency Program at Craven Community College.

(AGE) (DATE OF BIRTH)

Name _____ Commission expires _____

(Seal)



Craven Community College
Application for Minor's Participation in
Basic Skills Program

Name: _____ Social Security Number: _____

Address: _____ Date of Birth: _____

Last School System Attended: _____ Date Left Last School System: _____

NC Driving Permit/License Number (if applicable) _____

Date NC Permit/License Issued (if applicable) _____

Minor's Release

I, _____, being the above-named minor, do hereby petition Craven Community College (the "College") to accept me: in the Basic Skills Program at the College. I understand that enrollment and progress information may be released to my parent or legal guardian by the College, and I hereby consent to such release. I understand that in accordance with the North Carolina Uniform Driver's License Act (the "Act"), I may not be eligible for a North Carolina driving permit or license and if applicable, that revocation of my driving permit or license may result if I am unable to maintain adequate academic progress or meet the College's attendance requirements. I further understand that the College is required under the Act to certify to the North Carolina Division of Motor Vehicles ("DMV") whether I have maintained adequate academic progress and have met the College's attendance requirements. As a condition of my participation in the Basic Skills Program, I hereby consent to the release of this information to DMV to the full extent required or permitted by law. I certify that the information provided above and the date on which I officially left the last school attended are correct as stated on this form. As the above-named minor, I hereby authorize the school system last attended to release my education records to the College.

Signature of Minor _____ Date _____

Parent/Guardian's Release

I, _____, being the parent or legal guardian of the above-named minor, do hereby petition Craven Community College (the "College") to accept the minor in the Basic Skills Program at the College. I understand that in accordance with the North Carolina Uniform Driver's License Act (the "Act"), the above-named minor may not be eligible for a North Carolina driving permit or license and, if applicable, that revocation of his or her driving permit or license may result if the minor is unable to maintain adequate academic progress or meet the College's attendance requirement. As a condition of enrolling the minor in the Basic Skills Program, I hereby consent to the release of this information to DMV to the full extent required or permitted by law. I certify that the information stated above and the date on which the minor officially left the last school system are correct as stated on this form. As the parent or legal guardian of the above-named minor, I hereby authorize the school system last attended by the minor to release the: minor's education records to the College.

Signature of Parent / Legal Guardian _____ Date _____

Subscribed and sworn before me this _____ day of _____ 20__

(SEAL) _____ Date Commission Expires _____

Signature of Notary Public / Address



*Craven Community College
Division of Continuing Education
Basic Skills Program*

CONDUCT GUIDELINES

Policies on Student Rights and Discipline can be found in the college catalog and online at www.cravencc.edu. The following specific conduct violations may result in discipline proceedings:

1. Excessive loitering or congregating on campus when not attending class.
2. Loud and/or foul language outside classroom/lab doors or windows causing disruption of instruction.
3. Disrespect to staff through words or actions.
4. Rude or inappropriate comments to other students.
5. Sleeping in class.
6. Leaving class before dismissal or influencing other students to discontinue studies.
7. Smoking on campus.
8. Drug or alcohol use.
9. Inappropriate display of affection.
10. Destruction of property or instructional materials.
11. Littering building or grounds.
12. Academic dishonesty.
13. Using cell phones during class.

I agree to comply with these policies for admission and for Basic Skills Program enrollment.

PRINT Student Name

Student Signature

Date