



GREAT BAY COMMUNITY COLLEGE (GBCC)

ENROLLMENT FORM – *MINOR* STUDENT

Assumption of Risk and Liability Release

*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/DD/YYYY _____ Home Phone _____ Email _____

Grade Level: 11th 12th Goal College: _____ Goal Career: _____

High School Name _____ Anticipated Graduation Date: ____/____/____

Type of School: Public High School Private School Home School

GBCC term student is scheduled to attend: Fall Spring Summer Year: _____

High School Counselor recommended GBCC course(s):

GBCC Course Name and Number _____ GBCC Course Title _____

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Limit of two classes per semester

PARENTAL/GUARDIAN AND PARTICIPATING STUDENT APPROVAL AND RELEASE:

1. Credit courses are COLLEGE courses and will remain on the student’s permanent college record.
2. We understand that the College will have specific rules that will apply to the student's ability to enroll and attend. These rules may include, but are not limited to, certain enrollment prerequisites, registration requirements, placement tests, matriculation status, and access to "remedial" or "developmental" courses.
3. We understand that there will be no supervision provided for students prior to or after classes.
4. We understand that the coursework has college level content which may include mature material.
5. We understand that the College is authorized to evacuate students in case of an emergency.
6. We understand that students must adhere to the College’s Student Code of Conduct.
7. I understand that I am responsible to pay 50% of the actual tuition for GBCC courses. I also understand I am responsible for the cost of books and materials and associated fees.

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, topics and discussions; and that we assume all such risks regarding the participating student's participation at the College. On behalf of the same and to the full extent permitted by law, the undersigned parent and minor further release, hold harmless, indemnify and covenant not to sue the CCSNH and its colleges and/or their governing boards, trustees, employees and any agents from and against any and all liability for harm, injury, damage, claims, demands, actions, causes of action and expenses of any kind that we may have or that may hereafter accrue to us, directly or indirectly, related to any loss, damage or injury that we may sustain from the minor student's participation at the College.

Parent/Guardian Signature

Date

Participating Student Signature

Date

HIGH SCHOOL COUNSELOR APPROVAL:

1. The student listed is a Junior or Senior and is a regularly enrolled student at our school and has permission to take the above course(s) at GBCC.
2. The student is able to benefit from advanced scholastic or vocational work at GBCC.
3. The GBCC course(s) selected will also satisfy a high school requirement.

Counselor Name (Please Print)

Phone

Guidance

Guidance Counselor Signature

Date

High School Phone: _____

For Information or Questions:

Carey Walker
 Director of Admissions
 603-427-7605

For Returning Students:

Advising Center
 603-427-7728

For Office Use Only:

cwalker@ccsnh.edu

greatbayadvising@ccsnh.edu