



## Home Based Private High School Age Student: Request to Attend Class

**For students who have not yet graduated from high school**

Pursuant to Chapter 38.22(1s), Wis. Stats., and upon written consent of the instructor, Fox Valley Technical College will enroll Private Home School Students:

- All students 18 years old and younger **MUST** complete this form
- Students who have not reached their 16<sup>th</sup> birthday prior to the start date of the class **MUST** complete this form **and** have instructor approval
- All Students must meet all prerequisites for the courses to be eligible to enroll
- Must show proof of Private Home School – PI1206

### EIGIBILITY REQUIREMENTS

- Must be Wisconsin state resident
- If non-resident of state of Wisconsin, must have approval from District Board. Approval must be submitted with this form.

### AGE AND COURSE REQUIREMENTS:

		Age 15 and younger		Age 16-18	
		7am-3pm	After 3pm	7am-3pm	After 3pm
<b>Catalog number* begins with:</b>	<b>10, 30, 31, 32, 50</b> Post- Secondary	Yes	Yes	Yes	Yes
	<b>73, 74, 75, 76, 77, 78</b> Adult Basic Education or Adult High School Course	No	No	No	No
	<b>42, 47 or 60</b> Secondary Non-required Course	Yes	Yes	Yes	Yes
*Catalog Number: Number assigned by the State used to identify and search for classes					

- Students under the age of 14 will **not** be allowed to register in lab or shop courses where safety is a factor as determined by the course instructor. Other safety, licensing, certification, or other age limitations may supersede this policy.
- A parent or other adult must register and attend with children under age 16. This requirement can be waived by the instructor responsible for the class section based on student age, maturity level, course topic or courses targeted specifically to students under age 16 (e.g., Tractor Safety, Sewing for Teens).

### STUDENT'S RESPONSIBILITY:

- ✓ Complete form and return to Enrollment Services in Appleton E111 • Oshkosh 101 • Wautoma, Waupaca, Chilton, Clintonville Main Desk for processing. Forms can also be faxed to (920) 735-2484 or emailed to [registrar@fvtc.edu](mailto:registrar@fvtc.edu).
- ✓ Pay the fee associated with the class. Class fees are due 10 days prior to the start date of the class.
- ✓ Student may be removed from the class if instructor does not approve attendance. Student will be refunded at 100% if request is denied.
- ✓ A 100% refund will be issued to the student and parent/adult if the course arrangement does not work out, based upon their experience, within the first class session. The standard college refund policy applies beyond this. Please see visit [www.fvtc.edu/refund](http://www.fvtc.edu/refund) for more information on FVTC's refund policy.
- ✓ Students are impacted by the same benefits, requirements, and restrictions as all other students attending the College. They must be aware of and comply with college attendance, grading (per the class syllabus), and refund policies.

**STUDENT INFORMATION:**

Student Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Class Number: \_\_\_\_\_ Course Title: \_\_\_\_\_

High School: \_\_\_\_\_ When will you graduate from high school? \_\_\_\_\_

Will course completion be submitted to your high school to apply towards high school graduation?  
\_\_\_\_ Yes \_\_\_\_ No

If class is held during normal school day, do you have a letter from the school board/district approving the attendance in the class?  
\_\_\_\_ Yes \_\_\_\_ No

**STUDENT AND PARENT SIGNATURES:**

I, \_\_\_\_\_ give permission for \_\_\_\_\_ to enroll and attend the FVTC course above.  
(Parent/Guardian) (Student)

\_\_\_\_\_  
(Parent/Guardian signature) (Date) (Student signature) (Date)

**PARENT/GUARDIAN, PLEASE READ AND INITIAL THE STATEMENTS BELOW:**

\_\_\_\_\_ I understand that filling out this form does not guarantee enrollment in this class.

\_\_\_\_\_ I have read and understand the payment and refund policy.

**FOR OFFICE USE ONLY:**

**Enrollment Services Staff:**

Enroll student  Give student study list  Give form to Registration Staff

Student ID: \_\_\_\_\_ Date Received: \_\_\_\_\_ Staff User ID: \_\_\_\_\_

**Registration Staff:**

Emailed Instructor: \_\_\_\_\_

Contacted Student: \_\_\_\_\_  Approved: call student  Denied: drop/call student

**Instructor: Please return form to Enrollment Services E111 or scan and email to registrar@fvtc.edu after completing.**

- Approved: class is appropriate.
  - Parent must accompany student. Parent will be registered in course regardless of class capacity.
  - Student may attend alone.
- Denied: class is not appropriate. Explanation: \_\_\_\_\_

**Instructor signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_