



GO FAR, CLOSE TO HOME.

**Phoenix Community College
Special Admission
Registration Form**

For students under 18 year of age and who have not received a high school diploma or GED

Student ID #: _____
College Identification Number

Semester (Circle One): Fall / Spring / Summer 20 _____

Student Name _____ Phone (____) _____ - _____ (____) _____ - _____
Last First MI Day Night

Mailing Address _____
Street Address City State Zip

Grade/Level: Middle School: ___6th ___7th ___8th High School: Freshman___ Sophomore___ Junior___ Senior___ Other___

Student Age _____ Date of Birth ____/____/____ (mm/dd/yyyy) High School Attending _____

Add Class	Drop Class	Course Subject/Number (ex. Eng.101)	Course Number (ex. 12345)	Course Title	Credits	Faculty Approval Needed	
						Approval Requested	Approved Obtained (date)

Student: I agree to the exchange of academic information between participating institutions, including but not limited to college grade reports, transcripts and any other pertinent documents. I give permission to release any and all Phoenix College information to my parent/s or legal guardian/s. I also acknowledge that I have read and understand the Special Admission Information and Guidelines as outlined in this document and agree to abide by those policies and procedures.

Parent: As a parent/legal guardian, I understand it is my responsibility to make the appropriate payment of tuition and fees by the stated due date for the student named above. College credit will not be issued until full payment is received. Any refunds will be issued in accordance with PC guidelines. I also acknowledge that I have read and understand the Special Admission Information and Guidelines as outlined in this document and agree to abide by those policies and procedures.

Student Signature: _____
HS Staff Signature: _____

Date _____
Date _____

Parent Signature: _____
PC Staff Signature: _____

Date _____
Date _____



Revised 03.29.2013