



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

For students who have not yet graduated from high school

Fox Valley Technical College is an Equal Opportunity/Affirmative Action institution, providing equal opportunity to all persons, including members of underrepresented racial and ethnic backgrounds, females, veterans and individuals of all abilities.

For questions regarding the College's nondiscrimination policy, contact: Rayon Brown - rayon.brown6751@fvtc.edu (Affirmative Action), TitleIX@fvtc.edu (Gender discrimination, including sex-based violence), or Dan Squires - daniel.squires3328@fvtc.edu (Disability related discrimination).

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 16th birthday prior to the start date of the class **MUST** complete this form **and** have instructor approval
- All Students must meet all requisites for the courses to be eligible to enroll
- Must show proof of Private Home School – PI1206

ELIGIBILITY 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
Catalog number* begins with:	10, 30, 31, 32, 50 Post- Secondary	Yes	Yes	Yes	Yes
	73, 74, 75, 76, 77, 78 Adult Basic Education or Adult High School Course	No	No	No	No
	42, 47 or 60 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.
- ✓ 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 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: _____