

**Columbus State Community College**  
**SUMMER ENROLLMENT**  
**PERMISSION FORM FOR HIGH SCHOOL STUDENTS**  
**Option C**

Name of Student \_\_\_\_\_

Social Security Number/Cougar ID \_\_\_\_\_

Address \_\_\_\_\_

(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

Home Telephone \_\_\_\_\_ / \_\_\_\_\_

(Area Code)

(Number)

Date of Birth \_\_\_\_\_

High School \_\_\_\_\_ Expected graduation yr. \_\_\_\_\_

*I authorize Columbus State Community College to discuss any information related to my application, admission status, and academic progress at Columbus State with my parent(s) or guardian(s) and high school personnel. I understand I am expected to self-pay (Option C) and follow all rules and procedures of Columbus State Community College.*

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's printed name \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: if you are intending for any coursework taken during the Summer Quarter to be included as part of your high school credit/advancement, you must have a signature of approval from your high school's guidance counselor or principal:**

Guidance Counselor/Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_