



Student Course Selection/Questionnaire

Student Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

High School: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Number of Credits Available: \_\_\_\_\_

School Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I am taking UF classes at (please circle): High School UF Campus Online Semester & Year \_\_\_\_\_

Table with 4 columns: Course Number, Course Name, Days, Time. It contains four empty rows for course selection.

\*Please note: This does not guarantee course registration for students taking classes at UF or online. Online and on UF's campus students will still need to communicate with their advisor prior to enrolling.

Please initial next to each statement showing you understand and accept:

\_\_\_\_\_ I understand that I am required to follow and adhere to the policies set forth by the University of Findlay. This document can be found in the University of Findlay Undergraduate Catalog at: http://catalog.findlay.edu/en/current/Undergraduate-Catalog/Copy-of-University-Policies.

\_\_\_\_\_ I understand that the subject matter of a course enrolled in under the College Credit Plus program may include mature subject matter or materials, including those of a graphic, explicit, violent, or sexual nature, that will not be modified based upon College Credit Plus enrollee participation regardless of where course instruction occurs.

\_\_\_\_\_ I understand that the Family Education Rights and Privacy Act of 1974 (FERPA) protects all the privacy of student education records for all college students regardless of their age. I may allow access to share educational records by completing the FERPA release through my Workday account.

\_\_\_\_\_ I understand that if I fail a course or withdraw after the drop deadline, the school district may bill the family for the cost of attendance. If I withdraw after the drop deadline, a "W" will be listed on the college transcript for the course and will not affect the college GPA.

Circle one choice in response to each question:

Do you possess the necessary social and emotional maturity to participate in the College Credit Plus program?

YES NO

Are you ready to accept the responsibility and independence that a college classroom demands?

YES NO

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_