Glendale Community College
Recommendation for Admission of Selected Students

Student’s Name: ________________________________ GCC ID#: ________________________________

Grade Level (Level during the term of attendance): __________________
If enrolled in grades K - 8th, please indicate your grade level: __________________

Anticipated High School Graduation Date: 20_________ Current School Name: __________________

All high school students are required to submit a copy of their high school transcripts including all coursework completed to date. Student must be making satisfactory progress towards a high school diploma.

NOTE: Home-schooled students must attach a current copy of their Department of Education Private School Affidavit form with confirmation number.

If you are in grades 10th, 11th or 12th, during the term of your attendance, you will need ALL of the following signatures:

1. Student
2. Parent or legal guardian
3. High School Principal or Counselor (with recommended courses listed by the high school principal or counselor.)

If you are in grades 9th or below, during the term of your attendance, you will need ALL of the following signatures:

1. Student
2. Parent or legal guardian
3. High School Principal or Counselor (with recommended courses listed by the principal or counselor.)
5. Director of Admissions and Records at GCC. *

* An interview with the Director of Admissions and Records is required. - The student must bring a copy of their transcript to the appointment.

STUDENT’S CONSENT
YOU MUST SELECT ONE OF THE FOLLOWING:

☐ I give my permission for Glendale Community College to release my college enrollment information and grades to my high school Principal or Counselor.
☐ I DO NOT give my permission for Glendale Community College to release my college enrollment information and grades to my high school Principal or Counselor.

I understand that I am creating a permanent college record. I am also aware that I am responsible for my own progress and actions as a Glendale Community College student. I will adhere to the Standards of Student Conduct at the college (refer to the college’s catalog).

Signature of student __________________________ Date: ______/____/____

Phone Number __________________________

PARENT OR LEGAL GUARDIAN’S CONSENT

Your son or daughter will be exposed to educational programs designed for a diverse population of adult learners, which may involve sensitive topics that might be considered controversial or offensive to some. Your signature on this form acknowledges your receipt of this information and stipulates your permission for your child to enroll in college level courses and participate in all required activities that may include field trips off campus.

Signature of Parent or Legal Guardian __________________________ Date: ______/____/____

Parent or Legal Guardian’s Name (print) __________________________ Telephone Number __________________________

FOR HIGH SCHOOL USE ONLY

Basic skills courses are not considered to be advanced scholastic courses. High school students may not enroll in courses that they have previously completed with a substandard grade. High school students are limited to a maximum of six (6) units in each spring or fall term, and three (3) units in each winter or summer intercession.

Recommended Courses approved by High School Principal or Counselor

| Course # 1 | 
| Course # 2 | 
| Course # 3 | 

Note: If this course recommendation is for a summer session class, your signature also certifies that this student’s participation does not cause your school to exceed the 5% statutory limit.

Student’s anticipated date of graduation: MONTH _________ YEAR 20________

Signature of Principal or Counselor __________________________ Date: ______/____/____

Principal or Counselor’s Name (print) __________________________ Telephone Number __________________________

Affix School Seal

REQUIRED SIGNATURES FOR STUDENTS IN GRADES 9TH OR BELOW

Signature (approval) from a designee of the Governing School Board __________________________ Date: ______/____/____

Designee’s Name (print) __________________________ Telephone Number __________________________

Signature (approval) from the Director, Admissions and Records __________________________ Date: ______/____/____

July 2016