Application Packet for Collegiate High School Students

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Pensacola State College does not discriminate against any person on the basis of race, ethnicity, national origin, color, gender/sex, age, religion, marital status, disability, sexual orientation or genetic information in its educational programs, activities or employment. For inquiries regarding nondiscrimination policies, contact the Associate Vice President of Institutional Diversity at 850-484-1759, Pensacola State College, 1000 College Blvd., Pensacola, Florida 32504.
Collegiate High School Admission Checklist

☐ **WITHDRAWAL**
Students who are 16-17 years of age will need to obtain an official withdrawal form from their current high school. Students — 16-17 years of age — attending a public school in Escambia or Santa Rosa County must obtain a completed Collegiate High School Referral Form (included in this packet). Students who are 18 years of age or older will not need to submit withdrawal or referral forms.

☐ **TRANSCRIPTS**
Request your official high school transcript in a sealed envelope.

☐ **TESTING**
Students who have not passed the required statewide assessments to graduate from high school must take the Test of Adult Basic Education (TABE) prior to withdrawing from their current high school. Students should contact the Collegiate High School Student Services Office at 850-484-2177 for more information.
Students can pay the $20 testing fee in the Cashier’s Office, Building 2, Pensacola campus.

☐ **APPLICATION**
Complete the enclosed Collegiate High School application.

☐ **PARENT APPROVAL**
Parental approval is required for students who are 16-17 years of age. Obtain your parent’s signature on the Parent Agreement section of the application form. Students 18 years of age or older are not required to get parental approval.

☐ **APPLY**
Submit all required paperwork to the Collegiate High School, Building 11, Room 1113, Pensacola campus.

☐ **ORIENTATION/REGISTRATION**
Students must attend a Collegiate High School Orientation to register for classes.

☐ **TUITION**
Students can pay the $30 tuition fee at the Cashier’s Office or through their Spyglass account.

☐ **TEXTBOOKS**
Textbooks can be purchased at the bookstore located in the Student Center, Building 5, Pensacola campus.

☐ **STUDENT ID CARD/PARKING DECALS**
Student ID cards and parking decals are available at no charge in the Public Safety Office, Building 5, Pensacola campus. Bring your class schedule and a picture ID; your vehicle registration is required if you need a parking decal.

**ADDITIONAL ADMISSIONS REQUIREMENTS**
Students currently enrolled in Exceptional Student Education Programs (ESE); Alternative High Schools or Charter Schools; home education programs; or transient students enrolling at PSC for the purpose of transferring courses back to their high schools will need to contact the Collegiate High School Student Services Office at 850-484-2177 for prior approval before enrolling at PSC.

Please call the Collegiate High School Office at 850-484-2177 for more information.
COLLEGIATE HIGH SCHOOL APPLICATION FOR ADMISSION

APPLICANT INFORMATION

Social Security Number:                  
Date of Birth: MM/DD/YYYY

SSN Collection Statement on web site: www.pensacolastate.edu

Legal Name: ___________________________________________________________________________

Mailing Address: _______________________________________________________________________

Primary Telephone Number __________________________  Alternate Telephone Number ______________

Email Address _________________________________________________________________________

Gender and ethnicity information is requested to aid the State of Florida in its commitment to Equal Access and Equal Opportunity and to meet federal reporting requirements. Refusal to answer will not result in adverse treatment of any applicant.

Gender  □ Male  □ Female  Are you Hispanic/Latino?  □ Yes  □ No

Ethnicity (Check all that apply):  □ White  □ Black or African American  □ Asian
 □ American (Indian) Native or Alaskan Native  □ Native Hawaiian or Pacific Islander

Are you a United States citizen?  □ Yes  □ No  If no, indicate your country of citizenship: __________________________

If permanent resident alien, provide number A __________________________

If in U.S. on visa, provide visa type and expiration __________________________

If you and your family do not speak English at home, what language is spoken? __________________________

ENROLLMENT PLANS

Do you plan to pursue Bright Futures Scholarship?  □ Yes  □ No

Check the term and indicate the year you plan to begin your enrollment in the Collegiate High School:

□ August 20__________  □ January 20__________  □ May 20__________

□ October 20__________  □ March 20__________  □ June 20__________

EDUCATIONAL BACKGROUND

Name of the last high school attended _______________________________________________________________________

City/State ___________________________________________________________  Withdrawal date* __________________________

* Escambia County (Florida) public school students under 18 years of age must submit an official withdrawal form and referrals from last high school attended.

Were you suspended or expelled from a public, charter or private high school within the past 12 months?  □ Yes  □ No

If you answered “yes,” your application must be approved by the Collegiate High School Principal or designee: __________________________

APPLICANT CERTIFICATION

I certify that the information on this application is true and accurate. I agree to abide by the policies as provided in College publications as well as those established by state law and rule. I understand that policies, statutes, and rules are subject to change. I realize that furnishing false information to the college may result in denial of admission or disciplinary action. I have been provided access to the College’s Social Security Number Collection and Usage Statement and accept the terms of that collection, www.pensacolastate.edu. My signature below signifies acceptance of the terms of admission.

Applicant signature ___________________________________________________________________________ Date __________________________

PARENT AGREEMENT (For students under 18 years of age):

Student Name ___________________________ has my permission to attend the Pensacola State College Collegiate High School. I understand that any information regarding my student can be released only in person after the parent/guardian signs a notarized affidavit stating that the student is dependent in accordance with the Internal Revenue Code. An affidavit can be obtained from the Student Records Office.

Signature of Parent/Guardian ___________________________ Date __________________________

Students under 18 years of age must submit an official withdrawal from their high school along with this application.

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Dear Prospective Collegiate High School Student:

Thank you for considering the Collegiate High School program at Pensacola State College. The Collegiate High School (formerly Adult High School) has a long standing tradition of providing courses that will meet the requirements for the standard high school diploma in Florida. The courses offered are similar to those offered in a regular high school program, but the emphasis is placed on your special and unique needs.

You will notice that the Collegiate High School building is named the Raymond B. and Leila Hobbs Center for Teaching Excellence. A generous donor has provided funds to Pensacola State College for the creation of this center. The Center provides local teachers the ability to enhance their teaching skills at a high-tech and cutting-edge facility that has been named for educators who taught in Santa Rosa County decades ago. You will receive the benefit of the technology made available through this generosity.

Enclosed are the Application for Admission, Statement of Expectations, and general information regarding the admission and registration procedures. Please review this material carefully. If you have any questions, please do not hesitate to contact the Collegiate High School Student Services Office at 850-484-2177.

I look forward to hearing from you and assisting you with your admission and registration.

Sincerely,

Joseph V. Kyle
Principal
Secondary Education
Collegiate High School
Statement of Expectations

The Collegiate High School is an accelerated program that offers an exciting adventure and learning experience. Our goal is to guide you and help you earn the standard high school diploma so that you can continue your education at a college or university of your choice, enter the workforce, or join the military.

GUIDELINES FOR SUCCESS:

• Students are expected to accept responsibility for their education and be active in the decision-making process.

• Be prepared for class! Purchase your textbooks prior to the first day of class and bring them with you at the first class meeting.

• Attendance is a critical factor in achieving success in the Collegiate High School. Students must be present to learn. Therefore, regular class attendance is required. Students enrolled in full-credit courses (1 credit) are allowed to miss no more than six (6) hours of instruction. Students enrolled in half-credit courses (0.5 credit) are allowed to miss no more than three (3) hours of instruction. Additional absences must be approved by the course instructor.

• Be on time for class! Students who come to class late are counted as tardy. Three (3) instances of being tardy equal one (1) absence. Any student arriving 45 minutes or later after the beginning of class will be considered absent unless the instructor has given prior approval.

• Students are responsible for their own transportation to campus. The Collegiate High School is an open campus; and, students are free to leave campus after class is dismissed. No loitering is allowed on campus after class is dismissed.

• Students are expected to behave as adults. Dress appropriately, use proper language, and treat instructors, staff, and fellow students with respect. Students who do not behave appropriately will be dismissed from the Collegiate High School.

We are dedicated to helping you reach your potential and achieve your educational goals.
Collegiate High School
Student Referral Form
(for Escambia County and Santa Rosa County schools only)

Name of High School

_______________________________________________________________________

Student’s Name

____________________________________________________________________________

Social Security Number*
_________________________________  Date of Birth _______________________

*Please view the SSN Collection and Usage Statement on our website at www.pensacolastate.edu.

The above named student is:

☐ Currently enrolled and is eligible to continue attending classes
☐ Not currently enrolled but is eligible to return to school
☐ Currently under short term suspension for less than ten (10) days
☐ Currently under long term suspension for ten (10) or more days
☐ Currently under expulsion

__________________________________________________________________________________________

Print Name of School Official  Position

__________________________________________________________________________________________

Signature of School Official  Date

Submit this form with the Pensacola State College Collegiate High School application for admission.
AUTHORIZATION TO RELEASE STUDENT RECORD INFORMATION
AT THE REQUEST OF A PARENT/GUARDIAN

The Family Educational Rights & Privacy Act of 1974 (FERPA) restricts the type and amount of student information that may be released without a student’s written permission. Parent and legal guardians may be eligible to obtain student record information for a dependent child provided the parent or legal guardian meets the criteria as determined by federal law. A parent wishing to obtain information without the student’s consent must complete this form, have it notarized, and submit the form to the Registrar’s Office. (The Registrar’s Office has Notary Public service available for this purpose.) Once the original form is notarized and filed in the Registrar’s Office, the parent will be provided a copy of the document. The College reserves the right to require documentation to establish dependency.

This form allows the release of information during the tax year in which the form is completed. If information is needed from an instructor of an academic class taken by the student, the parent/guardian should make an appointment with the faculty member and present the copy of the notarized authorization to the faculty member at the time of the conference.

Federal law prohibits discussion by telephone or email with a third party including the parent of a dependent student. This form is to be presented to the Pensacola State College representative with whom the parent/guardian wishes to discuss the dependent student’s educational record.

____________________________________________________________________________________________________

Student ID Number  Last Name  First  Middle

Student’s Date of Birth  Dates of Enrollment

As the parent of the above-named Pensacola State College student or former student, I authorize the release of information as follows:

Release to

Name of individual, organization, educational institution

Address  City  State  Zip

Information to be released

Please indicate the specific information you wish released to you or the person/entity indicated above

Purpose for release of information

I certify that I am the parent or legal guardian of the above-named Pensacola State College student. As mandated by the Family Educational Rights & Privacy Act of 1974 (FERPA), I am eligible to obtain student record information or request student record information to be released to another person/entity because the student is a dependent for IRS purposes during the current tax year.

Date  Signature of Parent/Guardian*

* If information is being requested by a legal guardian court ordered documentation establishing guardianship must be presented. In some cases, the College will ask for dependency information and is permitted to do so by federal law.

NOTARIZATION REQUIRED

Signature, Notary Public  Type of ID produced

Printed, Typed, or Stamped  Commissioned Name of Notary Public

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TRANSCRIPT RELEASE FORM

Please accept this form as an official request to release the transcript of your former student.

The transcript is to be mailed to the following address:

Office Of Admissions & Registration
Pensacola State College
1000 College Boulevard
Pensacola FL 32504-8998

If a fee for transcript processing is required or if additional information is needed in order to release the transcript, please notify the student at the address indicated below.

TO BE COMPLETED BY THE STUDENT:

Mail this form to the Registrar’s Office or Records Office of your high school or the college/university you previously attended. If you have attended more than one college/university and need additional forms, you may copy this one or request additional forms from the Pensacola State College Registrar’s Office.

Name of School
________________________________________________________________________________

Address
________________________________________________________________________________
________________________________________________________________________________

NOTE: If you are unsure of the address, you may want to “Google” the school; it is possible that your previous school has a transcript fee and may have an option for requesting transcripts through the institution website.

Provide the information below to assist your high school or former college/university in locating your records:

Student Number at the school

Last Name
First
Middle

Name used when attending former school

Date of Birth __________________________ Dates of Attendance __________________________

Current Address

Number/Street/Apt
City
State Zip

Student Signature __________________________ Date __________________________

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