

**Conditional Admission
For**

**Students who meet requirements for intergovernmental agreements, contracts,
special programs, Home Schooled Students, or College-approved instruction.**

In accordance with Arizona state law, Yavapai College may admit a person who is under the age of
18 if granted special approval.

Student name: _____ Date of birth: _____

Yavapai College course requested: _____ (EX: ENG101) Spring/Summer/Fall 20____

This request is only for this course(s) and semester.

TO BE COMPLETED BY PARENT OR GUARDIAN

College offers a time of personal growth, inspiring fresh thoughts and new perspectives. The college learning environment encourages critical thinking and promotes contrasting perspectives of the world. This environment is one of adult interaction where students will likely be exposed to concepts, lectures and materials that are generally focused toward adults and adult audiences, including unrestricted internet access. In signing this form, you are affirming that you understand

- That the learning community and environment that your son or daughter is entering is one designed for and primarily used by adults.
- That your son or daughter may be exposed to conversations, publications, concepts, lectures, and other materials which may not be suitable for minors.
- That your son or daughter will be subject to all the requirements, policies and regulations of Yavapai College, including those set forth in the Yavapai College Code of Conduct.
- That your son or daughter will be establishing a permanent college academic record and transcript and that he/she may be required to furnish these permanent records to future colleges or universities.

I acknowledge that I understand the previous information and I give permission for

_____ to enroll as a student at Yavapai College during the
(name of student)

Spring/Summer/Fall 20____ semester for the above referenced class (s).

Signature of parent(s) or Legal Guardian(s): _____ Date: _____

**All students are expected to be fully acquainted with and comply with all current
published college policies, rules, and regulations.**

I understand that my signature below allows all educational records to be released to my parents.

Signature of Student _____ Date _____

Signature of College Official _____ Date _____

