



# **ACCEPTANCE CHECKLIST FOR RESIDENTIAL STUDENTS**

## Welcome to the 2018 College Preparation Program!

Please keep in mind that all enrollment forms must be returned within **2 weeks of acceptance**. Admission into the College Prep Program is on a rolling basis, so we cannot guarantee your spot will be held after this time. You will not be registered in your course(s) or assigned housing until **all** applicable forms have been returned to us.

Please keep copies of all your materials. All forms must include original <u>HAND-WRITTEN SIGNATURES</u> in blue or black ink; we accept scanned, original signatures. <u>We cannot accept computer-generated signatures</u>.

ALL Residential students:				
☐ Standards of Conduct Contract (Residents)				
□ Waiver and Release Form				
☐ Room and Board Application				
□ Summer Program Health Services Consent Form				
□ Summer Program Health Record				
□ Photocopy of Health Insurance Card				
Optional forms (also available online):				
☐ Automobile Permission Form (for <b>Residential</b> students only)				
☐ Off-Campus Overnight Stay Form (for <b>Residential</b> students only)				
International students only:				
☐ I-20/DS 2019 Request Form and all required documentation must be submitted to the International Office. See your admission letter for details.				
Contact our office if you already have an I-20 from another institution, such as a US high school, as you may not be required to request a student visa from Northwestern University.				
Disease return all forms by one of the fallowing motheries.				

### Please return all forms by one of the following methods:



Email(preferred):

cpp@northwestern.edu



Fax: 847-491-3660







# STANDARDS OF CONDUCT CONTRACT (RESIDENTS)

To ensure a beneficial, enjoyable, and safe experience while enrolled in our program, we require that you adhere to the following standards of conduct. Discuss the terms of this contract with your parents, then sign and return.

Attendance: Except in cases of serious illness, students are required to attend the College Prep seminars and all classes for which they are registered. If a student is to be absent from the campus during any of these scheduled classes, he/she must obtain advanced written permission from the Resident Director. The course instructor's approval may be required as well. Students who miss more than two classes must meet with the Resident Director for counseling. If the Resident Director concludes that all academic obligations are not being met, she will consult with the student and the student's parents about securing additional help, or may suggest withdrawal from the program.

**Academic conduct**: Students must abide by the academic rules of conduct established by Northwestern University, including the guidelines of the Statement of Academic Integrity included in the CPP Student Handbook. Cheating or plagiarism in any Summer Session class or in the IN FOCUS seminars may be cause for dismissal from the program and from the University. Please read the Statement of Academic Integrity carefully.

**Living arrangements**: Residents are required to live in the room and residence hall designated to them by the College Preparation Program and may not sleep over in any other hall or room.

**Curfew**: All College Prep students must check-in at the residence hall with a Resident Advisor by 10 pm, Sunday–Thursday and 11 pm, Friday–Saturday, unless accompanied by a staff member of the College Preparation Program. Residents are required to remain inside the residence hall from curfew until 6 am every day. Failure to check-in and leaving the hall after check-in without permission are serious violations and will be dealt with accordingly.

**Quiet hours**: Monday–Friday 11 pm–9 am, and Saturday–Sunday 12 am–10 am. Students may play music softly with room doors closed. This rule does not apply to common areas designated by Resident Advisors.

Off-campus stays: Except in the case of emergencies, college credit course students may request up to two weekday evenings and one weekend away from the residence hall during the course of the program. Off-campus stays must be authorized at least 24 hours in advance by the student's parent or legal guardian and the Resident Director. CPP IN FOCUS participants will be permitted off-campus stays in special circumstances, and should discuss this with the Resident Director individually.

**Visitors**: Only staff and residential College Prep students may visit residential floors of the dormitory unless permitted specifically by residential staff. Guests must vacate the residence hall common areas by curfew. Overnight guests are not permitted.

**Extracurricular activities**: The program staff organizes many supervised extracurricular excursions beyond campus during the summer, all of which provide students with ample opportunity to explore the area. Sign-up sheets for such events will be available in the residence hall or conducted through email or Facebook.

Students may explore the area unaccompanied by program staff, but must inform a program staff member before doing so and must return for check-in by the specified time. Note: this rule does not apply to absences approved by parental consent.

Students should remember that as mature participants in the College Preparation Program, attendance is not required at most extracurricular activities. The aim of the program is to give students a realistic and rewarding experience of college life. This includes individuals assuming responsibility for scheduling their time and fulfilling all academic obligations before participating in extracurricular activities. Students should always consider academic priorities before accepting an invitation to an outing.

**Automobiles**: Students may not operate motor vehicles on campus while enrolled in the program, and may not ride in motor vehicles except those operated by immediate family members. Northwestern staff, or when accompanied by staff members of the program.

Respect for self and others: Students must maintain a high level of respect for each individual in the program and in the University community at all times. Verbal, written, sexual, or physical harassment/harm of any kind to any person including self will not be tolerated and may be cause for dismissal from the program and the University.

Respect for property: Students may not physically damage or vandalize the residence hall and classrooms, or any other University or private property. This includes but is not limited to defacing trees, walls, sidewalks, and structures on or off campus. Students may not physically damage or vandalize another student's personal property. Such damage or vandalism will not be tolerated and may be cause for dismissal from the program and from the University.

## Standards of Conduct Contract (RESIDENTS)

**Smoking**: Students may not smoke while they are a part of the program. Matches, cigarette lighters, candles, or any other device producing an open flame are not permitted in the residence hall.

**Alcohol and drugs**: Alcoholic beverages, narcotics, and any other controlled substances are prohibited, except in the case of valid prescriptions. Students who purchase, consume, use, sell, distribute, or possess such substances face dismissal from the program. Furthermore, it should be understood that the use of any substance, including but not limited to, over-the-counter medicines, in a manner not in accordance with labeling or common nutritive applications is strictly prohibited and violates the Standards of Conduct.

**Firearms and weapons**: The possession or use of firearms, ammunition, BB guns, air rifles, firecrackers, explosives, sling-shots, knives (including pocket knives), or other weapons of any description, for any purpose, is prohibited. Any violation of this rule will result in immediate dismissal from the program.

**Consequences of dismissal**: There will be no refunds of any kind or cancellation of room and board charges for a student who is dismissed from the College Preparation Program for rules infractions. The College Prep Program reserves the right to provide the fact and reason for this dismissal to the Northwestern University Office of Undergraduate Admissions.

**Financial obligations:** Students and/or their parents or legal guardians are responsible for fulfilling their financial obligations to Northwestern University. Any student whose account becomes overdue must pay a late payment fee(s). In addition, the student and/or the parents or legal guardians are liable for any costs associated with the collection of the past due account, including, but not limited to, collection agency costs, court costs, and legal fees.

Your student account will be charged the following: your individual program fee, tuition, any lab fees, room/board charges, and any other additional charges you may have requested or incurred (i.e. Cat Cash added to your account, parking fees, late fees, lost room key, etc.). Program costs are listed on the CPP website and in your student handbook

These regulations are for your safety and cannot realistically cover all situations. The preclusion of actions or behaviors from those listed in this document does *not* deem them permissible. The Resident Advisors, Resident Director, and Director of Summer Session will determine whether rules have been violated and what disciplinary action, if any, should be taken. This contract includes the "Residence Hall Rules and Regulations," available at <a href="https://www.northwestern.edu/reslife">www.northwestern.edu/reslife</a>.

If a student is dismissed from the program and has reason to believe the dismissal is unjustified, he or she may file an appeal to the NU CPP Appeals Committee. Appeals will be limited to errors in procedures, the interpretation of regulations or the question of whether the student was in actual violation of a rule. The decision of the Appeals Committee is final.

<u>Please note</u>: Students may be photographed, video recorded, or interviewed by Northwestern University staff to promote the College Preparation Program. Student and Parent/Guardian(s) grant Northwestern University permission to use the Student's likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, controlled by Northwestern University, in perpetuity, and for other use by the University. Neither the Student nor Parent/Guardian(s) will make any monetary or other claim against Northwestern University for the use of the interview and/or the photograph(s)/video.

Student and Parent/Guardian hereby indicate their understanding and acceptance of the regulations and disclosures contained in this document. The Student further authorizes representatives of Northwestern University's College Preparation Program to discuss with his or her parent/guardian(s) any significant academic, administrative or disciplinary matter related to the student's enrollment in the program.

Student <i>handwritten</i> signature	Date
v	
Parent/guardian <u>handwritten</u> signature	Date
	Student <u>handwritten</u> signature  Parent/guardian <u>handwritten</u> signature



Email (preferred): cpp@northwestern.edu



Fax: 847-491-3660







# WAIVER AND RELEASE

Please read this form carefully and be aware that by registering and participating in the College Preparation Program (CPP) sponsored by the School of Professional Studies Summer Session at Northwestern University, you will be waiving all claims for injuries your child might sustain arising out of program activities, including field trips.

I recognize and acknowledge that there are certain risks of physical injury to participants in the College Preparation Program, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward may sustain as a result of said participation. I further agree to waive and relinquish all claims against Northwestern University, its officials, agents, volunteers and employees that my minor child/ward or I may have (or that may accrue to me or my minor child/ward) as a result of participating in the College Preparation Program.

I do hereby fully release and forever discharge Northwestern University from any and all claims for injuries, damages, or loss including transportation services when provided, that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with the College Preparation Program.

I have read and fully understand the above waiver and re	elease of all claims.	
Authorized <u>handwritten</u> signature (parent/legal guardian)	Printed name	Date
Student name (Name of College Preparation Program participant)		

Please return form by:



Email(preferred): cpp@northwestern.edu



Fax: 847-491-3660







## **ROOM AND BOARD APPLICATION AND KEY DEPOSIT AGREEMENT**

Room and board cost per week is \$464. (This includes housing and 21 meals, and will be billed to your student account.)

Housing will be provided to you from the Sunday before your course/seminar begins until the <u>Saturday following your last class meeting</u>. Students must check out of the dorm by 12 p.m. (noon) on Saturday.

Meal plans consist of 21 meals per week in a designated University dining hall. The meal plan is mandatory and *cancellation of meal plans is not permitted*. Additionally, plans do not include snacks or meals taken at any other on- or off-campus facility.

Student	Name First:	Last:	
Gender:	Male Female Transgender Other		
PROGR	AM OPTION		
	I am a <b>college credit course stud</b> Your program length will be deternends. Students must check out of I require housing from Sunday, Ju	mined by the course(s) you choose. Your official the dorm by noon.	move-out date will be the Saturday of the week your course
	<ul> <li>How to Think Like a Sc</li> </ul>	cide: Global Justice in the 21 <sup>st</sup> Century d Communication	om <b>Sunday, June 24 until Saturday, July 7</b> :
	<ul><li>So you want to be a Do</li><li>Life, Death, and Justice</li></ul>		
	<ul> <li>Fake News! Misinforma</li> <li>How to Build a Just So</li> <li>The Future is Female: \</li> </ul>	g IN 1 O Good Scrimater Which requires housing in tition and Public Opinion ciety: Reading and Writing about Social Justice Wonder Women in STEM hitarian Approach to Global Health	om danday, dary 22 and datarday, August 4.
Do you	Y RESTRICTIONS/SPECIAL NEED have any dietary restrictions? If y	ves, please explain:	
	ave a physical disability of mobility is separate sheet if necessary.	ssue that requires special accommodation, pleas	e provide any information relevant to your room assignment.
I hereby College	Preparation Program and that room	lerstand that the allocation of rooms is subject to	o the decision of the Undergraduate Housing Office and the Session. I understand that if my child loses the room key o
Student	name	Student <u>handwritten</u> signature	Date
Parent/g	guardian name	Parent/guardian <u>handwritten</u> s	ignature Date
			Mail: Northwestern University
	Email (preferred):	Fax: 847-491-3660	The College Preparation Program 405 Church St. Evanston, IL 60208-4220



Dear College Prep Program Student,

The Northwestern University Health Service provides quality medical care to Summer Program students. Services include General Medicine, Women's Health, Health Education, Pharmacy, Laboratory, Radiology, and Allergy Clinic. Further information can be found on the Internet at <a href="http://www.nuhs.northwestern.edu">http://www.nuhs.northwestern.edu</a>.

In order to attend classes, you <u>must complete the Admission Health Record form</u> and submit it no later than 3 weeks prior to the start of your program. <u>The form should be returned to the office of the Summer Program you are attending</u>. In addition, please pay attention to Part III of the form which asks "Does this student have special needs?" Every year some summer program students present to Northwestern with a variety of special needs that have not been noted or discussed beforehand (e.g., allergy or growth hormone injections), causing disruption for all concerned.

Information on this form is confidential; it will not be used to discriminate, to deny healthcare, or to affect admission status.

<u>All</u> office visits with the practitioners and <u>some</u> basic diagnostic tests done at the Northwestern University Health Service are free of charge to students enrolled in the University's summer programs. Please note that you and your parents or legal guardian are financially responsible for all costs of any services rendered at the Health Service (beyond those covered above) or for any healthcare received outside the Health Service.

It is strongly recommended that all students be protected by coverage under a comprehensive hospitalization plan. Please make sure that you return a photocopy of a valid health insurance card.

Please make a copy of the Admission Health form for your own record and to have a backup in case the original gets lost in the mail.

This letter is for your reference; it does not need to be returned to the summer program office.

We hope your summer visit to Northwestern University is filled with excitement and good health.

Following pages: Health Services Consent Form Summer Program Health Record





# SUMMER PROGRAM HEALTH SERVICES CONSENT FORM PERMISSION FOR MEDICAL TREATMENT AND SHARING OF MEDICAL INFORMATION

As the parent/guardian of my minor (under 18 years of age) son or daughter, I hereby authorize:

The sharing/exchange of relevant medical information between summer program representatives (officials, faculty, dormitory staff), other University representatives (faculty, staff, employees), Northwestern University Health Service, and, for the purpose of diagnosis and/or treatment, other medical providers. Each of the above individuals or entities is also authorized to communicate and discuss with the parents/guardians/emergency contacts of my minor child health, academic, administrative or disciplinary matters related to his/her enrollment in the summer program.

The transportation of my minor child, in either a private or university vehicle, by dorm counselors or summer program staff, to on-campus or off-campus medical appointments/care should such be required.

The provision, by the Northwestern University Health Service, of such diagnostic, therapeutic, voluntary immunization, and operative procedures and transportation as may be deemed necessary for my minor son/daughter. Any and all related expenses will be the responsibility of the student and/or parent/guardian. I further understand that under certain appropriate circumstances my son/daughter will be transported to area hospitals for diagnosis and/or treatment.

I understand that summer program representatives or Northwestern University Health Service staff will make reasonable efforts to contact and inform me or another parent/guardian/emergency contact before performing non-routine diagnostic/treatment procedures except in an emergency, and similar efforts will be made following any treatment at the Northwestern University Health Service.

Authorized handwritten signature (parent/legal guardian)	Printed name	Date
Student name (Name of College Preparation Program participant)		

### Please return form by:



Email (preferred): cpp@northwestern.edu



Fax: 847-491-3660





# NORTHWESTERN UNIVERSITY COLLEGE PREPARATION PROGRAM HEALTH RECORD

Email to: cpp@northwestern.edu
Fax to: 847-491-3660
Mail to: College Prep Program
405 Church St.

Evanston, IL. 60208

 ${}^{\star}\mathsf{For}$  questions regarding form, call above program

PART I—STUDENT'S DEMOGRAPHICS								
			Please print or t	ype this fo	orm			
Specify year: Summer of	5	Specify P	rogram:		-	Todav's Date:		
. ,,								
Name:(Last)			(First)					(MI)
Birth Date (MM/DD/YYYY):			☐ Male ☐ Female					
			_ D Male D I emale					
Home Address: No. Street	t	Citv	State		Phone:	() _		
		- ,			•			
Name of Parent(s), Spouse, or Guardian	(circle one):	-						
Address:No. Street		City	State	Zip	Count	try		
		•				,		
Telephone: Work ()		н	ome ()		E-mail Address: _			
In case of Emergency, Notify.	(if a dif	fferent	person than parent	, spouse,	or guardian list	ed above)		
Name:					Relationship:			
Address:								
No. Street			City		State	Zip		Country
Telephone: Work ()		Но	ome ()		E-mail Address: _			
Name of Healthcare Provider or Clinic that	at vou usuall	v consult	for medical care:					
	ar you aoua	, 0000						
Address: No. Street		City	State	Zip	Phone: (	)		
				· .				
			PART II — HEAL					
Please check any of t	he followir	ng that	apply and note next to	each the d	liagnosis and date	when the co	ndition	started.
1. ALLERGIES/ADVERSE REA	CHONS	IO MEL	DICATIONS/FOOD/IN	SECTS/OT	HER? L NO	□ Yes—pie	ase sp	ecity
2. DO YOU TAKE ANY MEDICA	ATIONS O	NAF	REQUENT OR REGUL	AR BASIS	? 🗆 No	☐ Yes—ple	ase list	i
Please list ALL prescription AND nonprescription medications AND supplements:								
3. HAVE YOU EVER HAD ANY								
Check each item:	No	Yes	Diagnosis/Date		ach item:	No	Yes	Diagnosis/Date
Appendectomy					eizure Disorder		+	
Asthma				1	tion, disease, or murn	nur	+	
Attention Deficit/Hyperactivity Dis.					sitive or AIDS		+	
Chicken Pox/Varicella				Migraine He			+	
Depression or Anxiety (specify)					osis/Epstein-Barr Vi	rus	+	
Diabetes Mellitus				Splenecton			+	
Eating Disorder/Anorexia/Bulimia				Tonsillector	•	2)	+	
Emotional/Psychological problems				Virai Hepati	tis (specify—A, B, C,?	?)		
Other surgical/medical condition not listed:								
Do you have a disability? ☐ No ☐ Y	es Please	explain:						
Name:Date of Birth:								

PART III—SPECIAL NEEDS	
DOES THIS STUDENT HAVE SPECIAL NEEDS OR SPECIAL INSTRUCTIONS FOR HEALTH CARE?   No Yes Please explain:	
PART IV—IMMUNIZATIONS  Because Summer Program students are not defined as full-time students by the State of Illinois, they are not required	to provide
proof of immunization against a number of infectious diseases. Nevertheless, Northwestern University <u>strongly recon</u> parents make sure that their child's' immunizations are up to date. By doing so, the risk of disease is reduced for all Program students.	nmends that
The following vaccinations (which most children in the United States should have had as part of their regular vaccinal childhood) are recommended:	tions during
Measles, Mumps, and Rubella vaccine which is typically administered as an "MMR" Tetanus/Diptheria/Pertussis vaccine which may be in the form of "DPT", "TDap", or "DTap"	
Because there are numerous childhood vaccinations which are given on varying schedules, the easiest approach is to one's pediatrician or family physician to ensure that your child is fully immunized against measles, mumps, rubella (G measles), tetanus (lockjaw), diptheria, and pertussis (whooping cough).	-
In addition, if there is any reason to suspect that your child has been exposed to tuberculosis (TB), he or she should either by a skin test ("PPD") or a blood test (e.g., "TB Quantiferon Gold")	be tested,
My child has completed the following vaccinations: (Circle)	
1. Measles (Rubeola) - Yes No Unknown	
2. Mumps - Yes No Unknown	
3. Rubella (German Measles) - Yes No Unknown	
4. Tetanus/Diphtheria - Yes No Unknown  Date of last Tetanus/Diphtheria vaccination:	
5. Tetanus/Diphtheria/Pertussis - Yes No Unknown Date of last Tetanus/Diphtheria/Pertussis vaccination:	
5. Varicella (Chicken Pox) - Yes No Unknown	
PART V—PERMISSION FOR TREATMENT BY NORTHWESTERN UNIVERSITY HEALTH SERVICE	
All students are advised to always carry their NU identification cards and the name, address, and policy number of their medical insurance. Students under the reminded to obtain and keep in their possession a permission-for-treatment letter signed by a parent or legal guardian in case of emergencies. Northwere reserves the right to have any student admitted to the University examined by a Health Service physician.	•
PERMISSION FOR TREATMENT OF PERSONS UNDER AGE 18 YEARS (MINORS)	
As the parent/guardian of my minor (under 18 years of age) son or daughter, I hereby authorize:  1) The sharing/exchange of relevant medical information between summer program representatives (officials, faculty, dormitory staff), other University represe staff, employees), Northwestern University Health Service, and, for the purpose of diagnosis and/or treatment, other medical providers. Each of the abo entities is also authorized to communicate and discuss with the parents/guardians/emergency contacts of my minor child health, academic, administrative	ve individuals o
<ul> <li>matters related to his/her enrollment in the summer program.</li> <li>2) The transportation of my minor child, in either a private or university vehicle, by dorm counselors or summer program staff, to on-campus or off-appointments/care should such be required.</li> <li>3) The provision, by the Northwestern University Health Service, of such diagnostic, therapeutic, voluntary immunization, and operative procedures and t</li> </ul>	•
may be deemed necessary for my minor son/daughter.  Any and all related expenses will be the responsibility of the student and/or parent/guardian. I further understand that under certain appropriate circumstances will be transported to area hospitals for diagnosis and/or treatment. I understand that summer program representatives or Northwestern University Health Service reasonable efforts to contact and inform me or another parent/guardian/emergency contact before performing non-routine diagnostic/treatment procedure emergency, and similar efforts will be made following any treatment at the Northwestern University Health Service.	my son/daughte ce staff will make
Student's <u>Handwritten</u> Signature Date	<u></u>
Handwritten Signature of parent/guardian Relationship	



# **HEALTH INSURANCE INFORMATION**

Name:	
Date of Birth:	
Insurance Company:	
Insurance Card Number:	
Insurance Group Number:	
Phone Number:	
Address:	<del></del>
Please provide a copy (front/back) of your current insurance	

### Please return form by:



Email (preferred): cpp@northwestern.edu



Fax: 847-491-3660







Mail: Northwestern University
The College Preparation Program

405 Church St.

Evanston, IL 60208-4220

Email: cpp@northwestern.edu • Phone: 847-467-6703 • Fax: 847-491-3660

# OFF CAMPUS/OVERNIGHT STAY FORM

Parents/guardians of residential CPP students:

Email (preferred):

cpp@northwestern.edu

- Use this form to inform CPP staff when your child has your permission to leave campus after check-in hours (after 10 p.m. Sunday-Thursday, and after 11 p.m. on Friday and Saturday).
- This form must be submitted for all off-campus stays, including those in which a student will be traveling with you or another parent/legal guardian.
- Email, fax, or send this form to the CPP office at least 24 hours prior to your child leaving campus overnight.
- Requests received after normal business hours (9 a.m. to 5 p.m. Monday-Friday) will not be reviewed until the following business day.

Please return form by:

Fax: 847-491-3660

The use of this form ensures that our staff is aware of your child's location while they are participating in the College Prep

Program. It helps avoid confusion at the nightly check-in, and is also for child's safety.						
Students may request no more than <b>one weekend away</b> from Northwestern throughout the duration of the program. Please contact the Resident Director if you need to request additional time.						
A separate <i>Automobile Permis</i> not you or another parent/legal		ır child will be	traveling in a vehicle with someone v	vho is		
Student name:						
I, the parent/legal guardian of t	he above student, request an off-c	ampus stay fo	or my child per the details below:			
Full Name and Contact	Date off Campus and Retu	rn Date	Relationship to student			
Authorized <u>handwritten</u> signature (parent/legal guardian) Printed name Date						
Parent/guardian phone:						
Parent/guardian email:						
CPP 2018-OFFICE USE ONLY Date received:						





# **AUTOMOBILE PERMISSION FORM**

Parents/guardians of residential CPP students:

Use this form to inform CPP staff that your child has your permission to ride in the vehicle with someone other than a parent/legal guardian

- This form must be submitted for relatives, such as aunts/uncles, siblings, and grandparents.
- Form must be received at least **24 hours prior** to your child traveling in a vehicle with anyone listed below.
- Requests received after normal business hours (9 a.m. to 5 p.m. Monday-Friday) will not be reviewed until the following business day.

Please return form by:

	Email (preferred): cpp@northwestern.edu	Fax: 847-	491-3660	Mail: Northwestern University The College Preparation Program 405 Church St. Evanston, IL 60208-4220				
m	The use of this form ensures that our staff is aware of the person(s) with whom your child may travel in a vehicle. A separate form for off-campus stays must be submitted if your child will be leaving campus overnight at any time. Students must always sign out of the residence hall with a residence staff member even if they are not leaving overnight.							
Т	he following is a list of people in whose rogram:	vehicle my child ma	y ride while he/she i	s a participant in the College Preparation				
	Full name		Re	elationship to student				
H	<i>landwritten</i> signature (Parent/Legal Gua	ardian) Prin	ted name	Date				
Ρ	arent/guardian phone:							
P	arent/guardian email:							
•	arong gaardian omaii.							