Underage Admission Approval Form

Oregon Coast Community College

Student Affairs • 400 SE College Way
Newport, Oregon 97366
Phone 541-867-8501 Fax 541-867-8559

Oregon Coast Community College requires that this form be completed by students planning to enroll at OCCC who are under age 16 and do not have a high school diploma or GED. Completion of this form is not required for students enrolling in dual credit classes that are offered at local high schools. Please print neatly.

Student:

Last Name __________________________________ First Name ________________________________

Social Security Number ______________________________________________________________

Date of Birth (Month/Day/Year) ______________________________________________________

☐ New OCCC Student

Term you request to begin taking classes ☐ Summer ☐ Fall ☐ Winter ☐ Spring

Parent/Legal Guardian:

Printed Name ________________________________ Home Phone ______________________________

Signature __________________________________ Date ____________________________

Middle/High School or Home School Approval:

Referring School ________________________________________________________________

I attest to this student’s maturity and readiness for the adult learning environment. I also attest to this student’s academic readiness for college-level course work.

Counselor/Administrator Name ______________________________________________________

Counselor/Administrator Signature ________________________________________________

Telephone ________________________________ Date ____________________________

Student Signature ________________________________ Date __________________________


RELEASE OF LIABILITY

I agree that Oregon Coast Community College, its directors, officers, agents, employees, and representatives shall not be responsible or liable for any personal injury, other injury, damage, loss, or expense, either to student or student’s property, resulting from student’s enrollment at OCCC or participation in an OCCC activity. It is the intention of the undersigned to exempt and relieve OCCC from liability for personal injury, death, or property damage, whether or not caused by negligence.

In accordance to ORS 348.105, students are fully responsible for payment of any costs incurred as a result of their registration with OCCC.

WE REPRESENT THAT WE HAVE CAREFULLY READ AND UNDERSTAND THE CONTENTS OF THIS DOCUMENT AND SIGN THE SAME OF OUR OWN FREE WILL.

________________________________________________________________________  Date
Parent/Guardian Signature

________________________________________________________________________  Date
Student Signature

________________________________________________________________________  Date
Dean of Students Signature