



**PLEASE TYPE OR PRINT:** 

## Please use black ink when completing this form.

This permission slip must be completed and signed by the student and his or her parent or guardian in order for the student to enroll in college courses under the College Credit Plus program.

A student eligible to participate in College Credit Plus and admitted to a college or university will enroll in actual college courses, which *may* include "mature subject matter" as defined in Ohio Revised Code 3365.035.

We enrolling in College (	(Student Name) and Credit Plus courses:	(Parent Name) hereby understand that by
	clude mature subject matter that will not be modificated gardless of where course instruction occurs; and	ed based upon College Credit Plus enrollee
•	res this signed form be submitted in the student's a ersity's instructions for submission of application m	application to the college or university following that naterials.
	ow indicate permission is granted to participate in 0 aware of and monitor the student's enrollment bas	College Credit Plus. It is the parent's or guardian's sed on information provided by the college.
Student Information	<u>n</u> – PLEASE TYPE OR PRINT:	
Student Name:		-
Email Address:		-
Phone Number	:	
	School (or homeschooled):	
Parent Information	- PLEASE TYPE OR PRINT:	
Parent Name: _		
Email Address:		-
Phone Number	:	
Student Signature: _		Date:
Parent Signature:		Date:
*Both student and pa	arent MUST sign regardless of students age. This M	UST be a handwritten signature.

RETURN THIS COMPLETED FORM TO THE COLLEGE/UNIVERSITY IN WHICH THE STUDENT IS ENROLLING. FOLLOW THE COLLEGE'S INSTRUCTIONS TO SUBMIT THIS FORM.

THIS COMPLETED FORM CAN ALSO BE SCANNED AND EMAILED TO ADMISSIONS@SSCC.EDU,

FAXED TO 937.393.6682, OR MAILED TO SOUTHERN STATE COMMUNITY COLLEGE, 100 HOBART DRIVE, HILLSBORO, OH 45133