

Parent/Guardian Notification and Consent



(Please note: An alternate form is available for students who are eighteen or older)

I am aware that		is participating in the	e City University of
	student print name ogram and the instructional act ninal Justice, located at 524		Y 10019.
My child is registered for			
wy child is registered for	course	day(s)	
time sta	rting month/day/year	ending mon	th/day/year
various forms of public and	a CUNY college, I understand private transportation. I unde er home or school without adult	rstand that there may be ri	sks involved in my
The City University of N image or photogra name, high school affiliat written and/or rec Solely for CUNY's non-come	ion, <i>and/or</i> orded oral statements made in one control or	child's or about College Now motion of the College Now	rmission for Yes □ No□
contact and inform the Co	hild cannot continue to attend llege Now office in order to go ad to a permanent failing grad	through a formal drop prod	cedure. Failure to
Please contact me regarding	activities for parents/guardian	s of College Now students.	Yes □ No□
Signature of parent/guardia	<u>n</u>	Date	
Print name of parent/guard	ian	Home telephone	
Cellular and/or work phone		Email address	
Name of emergency contact		Emergency contact tel	lephone
	nage or photograph, name, high ade in or about College Now as o		ritten and/or
Student Print Name	 Student Signature		Date