



## High School Counselor/ Parental Consent Form

### INSTRUCTIONS

By taking this course, the student is enrolled as a non-degree seeking student for this course only. Acceptance into this course does not guarantee admission to Boyce College as a regular, degree-seeking student in future semesters. Students who desire to attend Boyce College as a regular student in a future semester will be required to complete the full Boyce College application for admission.

- 1) ELIGIBILITY:** All applicants must be at least 15 years of age and any applicant under 18 years of age must have a parent or legal guardian complete this form to give consent for the student to receive college credit for any course. For High School Dual Enrollment courses, applicants must be in 9<sup>th</sup>-12<sup>th</sup> grade.
- 2) CREDIT TRANSFER:** For students intending to transfer to Boyce coursework to other institutions, the student is responsible for assuring that credit for classes taken at Boyce will be accepted as transfer credit by those institutions.
- 3) CONTACT INFORMATION:** Should you require additional assistance, admissions counselors are available to assist you Monday-Friday, 8:30 am-4:30 pm Eastern Standard Time.

### Boyce College Admissions Office

Toll Free 1.800.626.5525 ext. 4201 Fax 502.897.4723

Email [boyceadmissions@sbts.edu](mailto:boyceadmissions@sbts.edu)

Address Admissions Office  
2825 Lexington Road  
Louisville, KY 40206

### STUDENT INFORMATION

Full name \_\_\_\_\_  
Last First Middle Name usually used

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Program of Application  High School Dual Enrollment  Partner Program Course

If enrolling in a Partner Program Course, please select the program

Whitfield Academy  GMAA Event  D3 Youth Event  Somerset Christian Academy

Renown Event  Other \_\_\_\_\_

Semester Start Date  Fall  Spring  Summer

Year Start Date \_\_\_\_\_

**PARENT/LEGAL GUARDIAN INFORMATION**

\*Required only for students under 18 years of age.

Full name \_\_\_\_\_  
Last First

Phone \_\_\_\_\_ Email \_\_\_\_\_

By signing this form I give my consent for the student mentioned above to take a course offered by Boyce College and to provide the tuition payment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**HIGH SCHOOL COUNSELOR/HOMESCHOOL INSTRUCTOR INFORMATION**

\*Required only for High School Dual Enrollment students.

Full name \_\_\_\_\_  
Last First

Phone \_\_\_\_\_ Email \_\_\_\_\_

Your signature indicates Boyce College courses can fulfill high school credit at the applicant's school and the applicant possesses the academic ability to complete college level coursework. This also affirms the student meets the grade level requirement as stated above.

Signature \_\_\_\_\_ Date \_\_\_\_\_