



Program funded by Florida Department of Education

**CENTRAL FLORIDA COMMUNITY COLLEGE
2008-2009 ENROLLMENT APPLICATION
DEADLINE FRIDAY SEPT. 26, 2008**

**NOTE: AN INCOMPLETE APPLICATION WILL NOT BE PROCESSED
PLEASE COMPLETE IN BLUE OR BLACK INK**

STUDENT INFORMATION

Date: _____ Student ID Number: _____

STUDENT'S NAME: _____
LAST FIRST MIDDLE

SOCIAL SECURITY NO. : _____ - _____ - _____ GENDER: _____

DATE OF BIRTH: _____

STUDENT'S RACE/ETHNIC BACKGROUND (OPTIONAL): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME TELEPHONE NO. : (____) _____ MOBILE : (____) _____

E-MAIL ADDRESS: _____

STUDENT'S CURRENT ENROLLMENT STATUS

NAME OF SCHOOL: _____ SCHOOL CODE NO: _____

CURRENT GRADE LEVEL: _____ CURRENT GPA: _____ EXPECTED GRADUATION DATE: _____

HAVE YOU EVER BEEN RETAINED IN A GRADE? YES NO

IF SO WHAT GRADE? _____

ARE YOU IN A DROP OUT PREVENTION PROGRAM? YES NO (Name of program) _____

EXPECTED CAREER GOAL: _____

CROP PARTICIPATION REQUIREMENTS (Parent or Legal Guardian and student must initial each item)

✓ Parent or legal guardian and student **must** attend CROP orientation Monday, October 6 at 6 p.m., Central Florida Community College Hampton Center, 1501 W. Silver Springs Blvd. Ocala _____

✓ Parent or legal guardian and student **must** set educational goals. Student **must** demonstrate satisfactory academic progress toward educational goals measured by increase in grade point average and enrollment in rigorous coursework.

✓ Parent or legal guardian agrees to attend CROP educational meetings and seminars. _____

✓ Parent or legal guardian agrees to meet annually with the student's guidance counselor. _____

✓ Parent or legal guardian and student agrees to meet annually with the CROP coordinator. _____

✓ Parent or legal guardian agrees to notify CROP office in advance of change in address, telephone numbers, or e-mail address. _____

✓ Parent or Legal Guardian agrees to student participation in CROP sponsored classes, seminars, or other recommended activities as deemed necessary by CROP Staff. _____

✓ Parent or Legal Guardian agrees to notify the CROP office in advance if student cannot attend scheduled classes, seminars, or other recommended activities. _____

✓ Parent or Legal Guardian and student understand that noncompliance with participation requirements could result in student being dismissed from program. _____

THE INFORMATION IN THE HOUSEHOLD AND PARENT'S EDUCATION SECTION IS REQUIRED TO DETERMINE CROP ELIGIBILITY.

HOUSEHOLD INFORMATION *(Only include information about individuals living within household.)*

PARENT(S)/GUARDIAN'S NAME: _____

MOTHER'S OCCUPATION: _____ FATHER'S OCCUPATION: _____

FAMILY SIZE: _____ ANNUAL FAMILY INCOME: _____

TOTAL NUMBER OF CHILDREN ATTENDING SCHOOL:

ELEMENTARY : _____ MIDDLE : _____ HIGH SCHOOL: _____ POSTSECONDARY: _____

Please check all that apply:

- AFDC/WAGES PUBLIC ASSISTANCE FREE LUNCH REDUCED LUNCH

PARENT'S EDUCATIONAL INFORMATION :

FATHER'S EDUCATION:

- No High School Diploma High School Diploma Associate Degree
 Baccalaureate Degree Master's Degree Doctorate/Professional Degree
 Not sure

MOTHER'S EDUCATION:

- No High School Diploma High School Diploma Associate Degree
 Baccalaureate Degree Master's Degree Doctorate/Professional Degree
 Not sure

SCHOOL INFORMATION AUTHORIZED RELEASE

I, _____, AUTHORIZE CENTRAL FLORIDA COMMUNITY
PARENT'S OR LEGAL GUARDIAN'S NAME

COLLEGE'S COLLEGE REACH-OUT PROGRAM TO SECURE NECESSARY RECORDS, REPORT CARDS,
AND STUDENT INFORMATION FOR _____
STUDENT'S NAME

PERTAINING TO THEIR ACADEMIC PROGRESS FROM THE MARION COUNTY SCHOOL BOARD AND
_____. I ALSO AUTHORIZE CFCC TO RELEASE CONFIDENTIAL
NAME OF SCHOOL

INFORMATION TO THE DEPARTMENT OF EDUCATION AND POSTSECONDARY EDUCATIONAL INSTITU-
TIONS FOR EDUCATIONAL PLANNING. I CERTIFY THAT ALL OF THE INFORMATION GIVEN ON THIS
APPLICATION IS COMPLETE AND ACCURATE. I UNDERSTAND THAT ANY MISREPRESENTATION OF
FACTS MAY RESULT IN THE STUDENT'S DISMISSAL FROM THE COLLEGE REACH-OUT PROGRAM.

PARENT'S OR LEGAL GUARDIAN'S NAME

DATE

STUDENT'S SIGNATURE

DATE

REQUIRED DOCUMENTS (Please attach a copy of the required documents)

- 2007-2008 report card (grades 6-9) Unofficial transcript (grades 10-12)
 2008 FCAT Report (grades 6-9) 250 word essay (Why is Education Important to Me?)

For office use only:

Student ID: _____ *SS #:* _____ *GPA:* _____ *Free/Reduced Lunch:* _____

Accepted _____ *Not Accepted* _____ *Notified* _____ *Initials* _____

Comments: _____