PERMISSION SLIP



PLEASE TYPE OR PRINT:

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.

	(Student Name) and Credit Plus courses:	(Parent Name) hereby understand that by
Content may include mature subject matter that will not be modified based upon College Credit Plus enrollee participation regardless of where course instruction occurs; and		
-	es this signed form be submitted in the student's a rsity's instructions for submission of application ma	pplication to the college or university following that aterials.
	w indicate permission is granted to participate in C aware of and monitor the student's enrollment base	
Student Information	- PLEASE TYPE OR PRINT:	
Student Name:		
Email Address:		
Name of High S	chool (or homeschooled):	
Parent Information -	- PLEASE TYPE OR PRINT:	
Parent Name: _		
Email Address:		
Phone Number:		
Student Signature: _		Date:
Parent Signature:		Date:

RETURN THIS COMPLETED FORM TO BLUFFTON UNIVERSITY. PLEASE PRINT, SIGN AND MAIL TO BRIANNA FERRIS, BLUFFTON UNIVERSITY ADMISSIONS, 1 UNIVERSITY DRIVE, BLUFFTON OH 45817.