



Admissions Office
1701 East Front Street
Traverse City, Michigan 49686
Phone (231) 995-1054
Fax (231) 995-1339

High School Graduate Under Age 18 Parent Approval Form

Student Last Name: _____ First Name: _____
Birth Date: _____ NMC ID: _____
High School: _____ HS graduation year: _____
Effective Semester: _____ Year: _____
Fall Spring Summer

Note to Parents and Students

It is the responsibility of the student to provide this form to the Admissions Office prior to enrollment in classes. Students who register prior to submitting this form may be dropped from their courses. This form will remain in effect until the end of the semester in which the student reaches 18.

Student FERPA Disclosure (Check one box only)

I hereby allow the release of all aspects of my student account and financial aid information (as allowed under the Family Educational Rights and Privacy Act) to my parent/legal guardian shown below. *To provide access to other educational information (grades, registration, transcripts, financial and judicial records) that will not expire unless cancelled by the student, student must complete an Authorization to Release Student Information in addition to this form.*

I do not agree to allow my parent/legal guardian to have access to my student account and financial aid information.

Signature of Student Date: _____

Parent/Legal Guardian Approval

I confirm that my son or daughter will be a high school graduate and at least 16 years of age on the first day of the semester. Furthermore, I will assume financial responsibility for any and all costs associated with my child's attendance at Northwestern Michigan College, if not covered by any other means. I understand that my son or daughter is participating in an adult educational environment and I hereby assume responsibility and hold Northwestern Michigan College harmless for any adverse consequences of that participation. I understand that enrollment is contingent upon an available open seat in the course(s) selected.

Print Parent/Legal Guardian Name Daytime Phone: _____

Address City State Zip Code Date: _____

Signature of Parent/Legal Guardian

Parent PIN# (last 4 digits of SSN)

Completed form can be returned to
Northwestern Michigan College Admissions Office
1701 E. Front St. Traverse City, MI 49686
Fax to: 231-995-1339.