



Admissions & Records Office  
 21250 Stevens Creek Blvd., Cupertino, CA 95014  
 (408) 864-5300/FAX (408) 864-8329

SPECIAL ADMIT  
 HIGH SCHOOL ENRICHMENT GRADES 11-12  
 PERMIT TO ENROLL

An approved Permit to Enroll must be submitted **each Quarter** and is valid for the requested quarter only. For students enrolled in **home school**, a **copy of a current Private School Affidavit must** also be attached. This permit does not register a student nor guarantees a seat will be available in courses requested at the time of registration. Students must also meet course prerequisite requirements as indicated in the class schedule. (Submit official transcripts or take an assessment test prior to registration.) **Students may not enroll in more than 11 units each quarter (6 in summer), and may not take ESL, Basic Skills, GUID, SKILS or 200 level (non-degree applicable) courses.** Fees are assessed based on part- or full-time status; there is no exemption of fees for full time enrollment.

\_\_\_\_\_  
 Last First M.I. Student ID Number

**Email Address:** \_\_\_\_\_ (\_\_\_\_\_) - \_\_\_\_\_  
 Student's Home Phone

**Circle Grade Level:** 11th 12th \_\_\_\_\_  
 School Name (Please list city/state if outside Santa Clara County)

**High School Counselor:** \_\_\_\_\_

**Type of School:**  Public High School  Private School  Home School

The above named student has the recommendation of the high school principal to concurrently enroll at De Anza College in the following college course(s):

Quarter  Summer  Fall  Winter  Spring  20\_\_\_\_\_

*Department & Number	Course Title	Units
Example: CIS 10	Intro to Computer Applications	3.0
<b>Maximum of 11 units per Quarter</b>	<b>Total Units:</b>	
<i>Alternate courses if above choices are closed or cancelled</i>		

Note: Enrollment is restricted to the course(s) listed above and must be specific. Do not enter simply Music, Art, Psychology, etc., "any course" or leave blank. **\*Department and number must be provided** or registration will not be permitted.

\_\_\_\_\_  
 High School Principal's Name/Please Print Principal's Phone Number (\_\_\_\_\_) - \_\_\_\_\_ Ext.

*Principal's signature acknowledges that no more than 5% of his/her high school's 11th and 12th grade each is attending De Anza College (Ed Code 76000.3.i)*

**Parent, Student, Principal – please read the following information carefully and approve below:**

By entering a college environment, students who are minors will be exposed to a diverse population in educational programs designed for the adult learner. Courses may involve sensitive topics that might be considered controversial or offensive in the secondary school setting. Students also have open access to the internet on campus computers and access to family planning (pregnancy testing, HIV testing, condoms) in the Health Center.

All college coursework is governed by the Family Education Rights and Privacy Act which allows release of academic information, including grades, to the student only regardless of age. Academic information is not released to parents or third parties without the written consent of the student.

If a class does not meet at its scheduled time (i.e. cancelled class or ends early), De Anza College does not inform parents or guardians nor will staff or the instructor assume responsibility for students once a class is released.

I have read the above and authorized part-time at De Anza.

\_\_\_\_\_  
 Student's Signature Date Principal's Signature Date

\_\_\_\_\_  
 Parent or Legal Guardian's Signature Date

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## Checklist for High School Students Enrolling at De Anza

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### 1. College Application:

Submit your application online: Go to [www.deanza.edu](http://www.deanza.edu) and click on **Apply Now** at <http://www.deanza.edu/apply-and-register/>

### 2. Submit your high school release by fax, mail, or in person.

Make sure it includes all signatures, the courses you are approved to take, etc. Read the important information on the form. Forms can be downloaded at: <https://www.deanza.edu/admissions/forms.html> and clicking on [High School Concurrent Enrollment](#).

You will be assigned a registration appointment time. You can check your registration date and get other important information when you log in at MyPortal. (<https://myportal.fhda.edu>).

### 3. Placement Tests:

If you want to take a math, English or certain science courses, you will need to complete assessment. Assessment information is available at <https://www.deanza.edu/admissions/placement>.

### 4. Registering for Classes:

- a. You must be in the 11th or 12th grade to register for De Anza classes;
- b. You may enroll in up to 11 units;
- c. Courses need to be vocational, enrichment, or courses unavailable at your high school. Students may not enroll in more than 11 units each quarter and may not be approved to take any remedial class such as ESL, EWRT, MATH, SKILLS, GUID, READ, or READ, or SPED courses.

### 5. Extra Information for high school students attending De Anza:

- a. Your records are confidential and protected by the Federal Educational Rights and Privacy Act (FERPA) and are not available to parents without a written release from the student;
- b. Your high school might not accept courses that you complete that were not approved on your release form – make sure you get high school approval before enrolling;
- c. You will need to request transcripts if you want your grades sent to your high school or need a transcript sent to another college or university – request transcripts online at <https://www.deanza.edu/admissions/order-transcripts.html>
- d. All courses will appear on your permanent record and must be reported to any other college or university to which you apply.
- e. Be sure you are aware of the Student Code of Conduct and other information in the catalog at <http://www.deanza.edu/catalog/>. Thank you!

### 6. Questions?

1. Email your questions to [webregda@fhda.edu](mailto:webregda@fhda.edu) or call 408.864.5300.

Term (circle one)

Winter Spring Summer Fall

Year: 20\_\_\_\_

Student ID#

\_\_\_\_\_

**De Anza College  
Student Health Service  
Consent for Treatment of Minor**

Name of Minor \_\_\_\_\_  
*Last First Middle*

Date of Birth \_\_\_\_\_

I give permission for an emergency first aid and treatment for my minor child/legal ward. I also give my permission for him/her to be treated by a nurse, physician and/or mental health counselor in the Student Health Center at De Anza College.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_