

High School Official Signature

HCC		Community WAIVER APPRO	_	From your HC acceptance em
			·	
Last Name Almeta Crawford HS / F	First Name		HCC St	udent ID
Name of High School / District		Current Grade	HS Gra	duation Year (YYYY)
din taking DC.	the student's participo the high schools' appr			omeschool High Select "Academ
Beginning Semester Select One Semester	Select One 🔻 📗	demic gram Undecided	▼	o-14 Credit Hours (No
	he term you aduate HS.	Se	elect "Undecide cademic Progra	
alumni to quickly locate and save de	tails about our underg	graduate courses an	d programs [credit	bearing courses only].
I acknowledge that the student with taking dual credit course(s I understand that the student r credit course. I understand that Academic Free	t is responsible for paying s) unless otherwise stated must have written permis eedom allows faculty and	g all costs (tuition, fees d by high school/distric ssion from the high sch d students to pursue re	t. lool counselor before levant course conten	he/she can withdraw from a dit that may be adult in nature.
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