

**THE RUSH-HENRIETTA SENIOR HIGH SCHOOL COLLEGE PROGRAM
TUITION WAIVER FORM**

Interested Rush-Henrietta Senior High School students who have completed their sophomore year and who have demonstrated the ability and determination necessary to succeed in a college course may take up to two undergraduate classes at the University of Rochester's College of Arts and Sciences and Rochester Institute of Technology per semester /quarter or summer session. These include day classes, night classes, online courses as well as special "Rochester Scholars" mini-courses offered during school vacations. Enrollment in all classes is on a "space-available" basis only.

STUDENTS MUST:

1. Have completed grade 10 by earning at least 10 high school credits
2. Be enrolled in courses totaling at least 6.50 credits
3. Have earned a cumulative average and be passing all courses with at least 80%
4. Show evidence of interest commitment, maturity and determination as judged by the school counselor
5. Demonstrate appropriate attendance
6. Provide your own transportation and pay for their own books and equipment
7. Take no more than two college courses during each quarter/semester; (only one during the first experience)
8. If applicable, successfully have completed previous college coursework. Those having received a grade of F or W will be ineligible to register for other college courses during the following semester.

STUDENT ELIGIBILITY:

To be completed by the school counselor:

- _____ Year of High School graduation
- _____ Number of completed credits to date
- _____ Cumulative transcript average
- _____ Last report card average

Y / N Attendance eligible-Teen Employment
(circle one)

Y / N Meets course pre-requisites, *if applicable*
(circle one)

Y or N First college course
(circle one)

I have reviewed this application and support this students desire to participate in a college course.

_____ Counselor's Signature

_____ Date

_____ Phone Number

REGISTRATION INFORMATION:

Student Name: _____ SSN: _____

Mailing Address: _____ Grade: _____ Student ID #: _____

_____ Phone No: _____ Gender: M or F

I give permission for a copy of my grade from the above college to be sent directly to the Rush-Henrietta Counseling Center at the address below. Additionally, I understand that the Rush-Henrietta Senior High School reports all course work on my transcript including failed and dropped classes.

_____ Student Signature

_____ Date

_____ Parent/Guardian Signature
(if student is under age 18)

_____ Date

COURSE INFORMATION: Start Date _____ Ending Date _____

RIT - FALL QUARTER _____ WINTER QUARTER _____ SPRING QUARTER _____ SUMMER QUARTER _____

U OF R - FALL SEMESTER _____ SPRING SEMESTER _____ SUMMER SEMESTER _____

Complete Course Title _____ CODE# _____

Time of class: _____ Days Scheduled : _____ ON-LINE: Yes _____ No _____

*** PLEASE NOTE - IF THIS FORM IS NOT COMPLETED AND ON FILE WITH THE COUNSELING CENTER, YOU ARE SUBJECT TO BEING BILLED BY THE COLLEGE.**

Appealed to Assistant Principal _____ Approved _____ Disapproved _____ Assistant Principal Signature _____
(signature required only if appealed) Date

**Rush-Henrietta Senior High School
1799 Lehigh Station Road
Henrietta NY 14467**