



Application for Admission

Camden County College 21st Century SCHOLARS Program

DIVISION OF SCHOOL, COMMUNITY AND WORKFORCE TRAINING PROGRAMS
P.O. Box 200, College Drive
CON #351
Blackwood, NJ 08012
(856) 227-7200, Ext. 4530



* Required Fields

*Full Name: _____

*Address: _____ City _____ Zip _____

*Date of Birth: _____ Ethnicity: _____ Gender: M/F _____

Home Phone: _____ Cell Phone _____ Email Address _____

*Current Grade Level: ___(9) Freshman___ (10) Sophomore___ (11) Junior___ (12) Senior___ Special Needs: YES / NO

*Is English your first language? ___YES___ NO / What is the language spoken in your home? _____

PARENT/LEGAL GUARDIAN INFORMATION (All information is confidential)

*Full Name: _____

*Address: _____ City _____ Zip _____

*Cell Phone: _____ Home Phone: _____ Work Phone: _____

* Emergency Phone: _____ *E-mail: _____

SCHOOL RECORDS RELEASE OF INFORMATION:

I, the undersigned, give permission for the 21st Century Scholars Administration and Evaluators to examine and review for educational purposes copies of any/all records maintained by the high school that pertain to me. This includes but is not limited to, *transcripts, test scores, evaluations, recommendations, schedules, disciplinary records and free reduced lunch information*. Photos may be taken of program participants involved in activities for publication.

Granting this permission will assist the 21st Century Scholars program in achieving student goals and objectives. This permission is granted for as long as the 21st Century Scholars program operates through Camden County College and is not dependent upon my being a student at Camden County College.

*Student Signature: _____

*Parent Signature: _____ Date: _____

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