



Bayonne High School Early College Academy
Student Agreement

I, _____ (Print Name) wish to apply for the Bayonne High School Early College Academy through Hudson County Community College.

I understand and agree to the following terms of enrollment in the Early College Academy:

- I am or will be a Bayonne High School student in good academic and disciplinary standing.
- I understand that I will be registered as a non-degree seeking, part-time student enrolled in a credit-bearing college level courses and that a record of college credit in the form of a HCCC Transcript will be recorded.
- I understand that I must attend all required Orientation and in-person Advisement and Registration appointments.
- I understand that I will be held to the HCCC Academic Calendar and if I choose to withdraw from a class and that a mark of W will be placed on my transcript.
- I understand that I may not use the course(s) from HCCC to satisfy high school graduation requirements unless prior permission has been obtained and documented from my high school.
- I understand that a grade of a C is minimally acceptable for transfer and a grade of an F will result in no credits awarded.
- I understand that if I decide to transfer credits earned from HCCC to a college other than HCCC, the receiving college will determine the transferability of the credits to their degree requirements.
- I agree to abide by the HCCC Code of Conduct as described in the Student Handbook as it pertains to rules and regulations governing student rights and responsibilities.

I certify to the best of my knowledge that the information is correct and that false information may subject the application to be disqualified from the Bayonne High School Early College Academy at Hudson County Community College. Failure to meet the terms of enrollment as described above may result in immediate dismissal from the Early College Academy.

Student (Print) _____

Student's Date of Birth ____ / ____ / ____

Signature & Date _____ / ____ / ____

HS Graduation Year _____

HS Representative (Print) _____

Parent/Guardian (Print) _____

Signature & Date _____ / ____ / ____

Signature & Date _____ / ____ / ____

After completing the online application and, please return this completed form to your School Counselor no later than Monday, February 3, 2020.

Hudson County Community College does not discriminate on the basis of race, color, creed, sex, sexual orientation, national origin, age, religion, veteran or marital status, or disability in its employment practices or educational programs. Inquiries regarding compliance with federal or state anti-discrimination laws may be directed to the Affirmative Action Officer.