

• RECOMMENDATION FOR SPECIAL STUDENT STATUS •
Gavilan College

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| <ul style="list-style-type: none"> • Gavilan College accepts high school students for advanced (transfer level courses numbered 1 - 99), vocational, or physical education courses. • Placement assessment scores from Gavilan College and current transcripts from the student's school are required prior to registering. All course advisories and prerequisites are applicable. | <ul style="list-style-type: none"> • All credit earned at Gavilan College is "college" credit. A transcript of work completed at Gavilan will be sent to the recommending school at the end of the semester. • High School contract students will pay the per unit enrollment fee and provide their own texts and instructional supplies. • All students shall conform to the college's academic rules, regulations, and codes of conduct. |
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Student's Name _____ Social Security Number _____

Address _____

Telephone Number _____

Date of Birth _____ Last Grade Completed _____

Semester for which student is applying: Fall _____ Spring _____ Summer _____ 19 _____

Course(s) Recommended by the Student's School Counselor/ Designated School Official

Gavilan Course Number and Units	Gavilan Course Number and Units

Recommendations

1) Signature of Parent or Guardian _____ Date _____

In an emergency, contact _____

2) Signature of Recommending School Official _____ Date _____

Name and Address of Recommending School _____

The recommendation of the school official signifies that the student is in good standing at his/her school, is eligible for continued enrollment, and has the ability and maturity to benefit from college-level instruction. A current transcript of the student's coursework is attached.

2a) District Verification of "Home School" registration _____

3) Gavilan College Counselor _____ Date _____

- Gavilan Counselor verifies the following:
- a) The placement assessment was completed on (date) _____ DSPS exemption? _____
 - b) The recommended course is numbered 0 - 99 (summer term exempted).
 - c) A current transcript from the student's school is attached and the student is in good standing.

4) Dean of Student Services (or designee) _____ Date _____



Schedule Worksheet

Study Program

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
7:10 - 8:00						
8:10 - 9:00						
9:10 - 10:00						
10:10 - 11:00						
11:10 - 12:00						
12:10 - 1:00						
1:10 - 2:00						
2:10 - 3:00						
3:10 - 4:00						
4:10 - 5:00						
5:10 - 6:00						
6:00 - 7:00						
7:00 - 8:00						
8:00 - 9:00						

Use this worksheet to plan your schedule for the semester. This trial study program is printed for your convenience. For each day a class meets, list the course number and shade in the appropriate time slots. If a class extends beyond the hour, shade in the time slot to the nearest half hour. Gavilan College assumes no responsibility to adjust time conflicts which are the result of student errors.

Complete esta prueba de programa de estudios. Examinela para conflictos. Esta prueba de programa de estudios se ofrece para la conveniencia del alumno. Para cada día que una clase se reúna, apunte el número de la asignatura y llene las áreas del horario apropiadas. Si una clase se extiende más allá de una hora, llene la área próxima hasta la media hora siguiente. Es la responsabilidad del alumno evitar conflictos de horario. Gavilán College no será responsable de ajustar conflictos de horario que resulten por errores del alumno.