

# Underage College Credit Application

## 16-17 Years Old

This Underage Admission Application is for students registering into ED 216 only.

The application is a fillable PDF form. Please answer all items on the application.

**Instructions:** Download the application, fill it in, save it and attach it to an email. **IF YOU USE YOUR SCHOOL ACCOUNT TO FILL IT OUT, PLEASE DO NOT USE GOOGLE DOCS.**

Follow these steps:

1. Submit the *Underage Admission Application and Underage Approval Form (16-17)* to [highschool@chemeketa.edu](mailto:highschool@chemeketa.edu).
2. After submission, you will receive an email with a student I.D. number (K number) and username to the email address on the application. It will also include instructions on how to create your MyChemeketa account and register for classes. Please check your spam folder as well.
3. Follow the instructions in the email including how to register for the class with the provided CRN numbers. A Youtube instructional video link is provided to help you!
4. If you need assistance with registration, please contact Vania Fenner at [maria.vania.fenner@chemeketa.edu](mailto:maria.vania.fenner@chemeketa.edu)

### Important Information

ED216 CRN 82334

Tuesdays 6:30 - 9:20 pm



# Underage Admission Application - (Ages 16-17)

Chemeketa High School Partnerships  
4061 Winema Place, Bldg. 49, Room 102  
Salem, OR 97305  
Phone: (503) 399.5293  
Email: [highschool@chemeketa.edu](mailto:highschool@chemeketa.edu)



You will be issued a Chemeketa student identification (ID) number (K#) to be used as your primary ID. If you provide your social security number to the college it will only be used for record keeping purposes, complying with federal and state requirements, doing research, reporting, extending crediting or collecting debts. You may be required to provide your SSN to the college for compliance with specific federal and state regulations such as applying for financial aid, loans, grant programs and tax reporting requirements. Providing your SSN means that you consent to the use of the number in the manner described. Your SSN will not be given to the general public. Please note that per OAR 559-004-0400, if you choose not to provide your SSN, you will not be denied any rights as a student.

Which term will you enroll at Chemeketa Community College? (choose one)  
 Summer (June)  Fall (Sept.)  Winter (Jan.)  Spring (March) Year: 20

SSN# (optional)

First Name

Middle Name

Last Name

Former Last Name

Mailing Address

City  State  Zip

Daytime Phone Number  Cell Phone Number  Date of Birth

Email Address

Will you have lived in Oregon for the 90 days just prior to the term you begin?

No  
 Yes

**Ethnicity and Race:** What is your ethnicity?  Hispanic or Latino  Not Hispanic or Latino

**Gender:**  Male  Female

Select one or more races to indicate what you consider yourself to be:  
 American Indian or Alaskan Native  Asian  Black or African American  Native Hawaiian or Other Pacific Islander  White

High School Name (no abbreviations please)

City  State

Name of last college attended other than Chemeketa

City  State

Do you plan to earn a degree, certificate or diploma at Chemeketa? (choose one)

Yes, high school diploma  
 No, here to take classes  
 Undecided

**Indicate your high school status: (choose one)**

Did not complete high school  External diploma program  Certificate of Initial Mastery  Attendance completion GED year

Alternative high school diploma  Still in high school  Certificate of Advanced Mastery  Proficiency exam High school graduation year

**Indicate your college status prior to Chemeketa: (choose one)**

Have not attended college  Short -term training, private vocational school award, or other

**Indicate the main reason you are here this term: (choose one)**

Take classes to transfer to 4-year college  Explore career or educational options  Learn English  Learn skill to get a job

Take classes to finish high school or GED  Improve writing, reading or math skills  Improve job skills  Personal enrichment  Other

Chemeketa Community College releases only very limited information regarding students: enrollment status, dates of enrollment, degree or certificate, program of study, athletic statistics or honors awarded. If you do NOT want any person outside of the college, including prospective employers, to know any of these, you must file a request for Non-Disclosure of Student Information form with the Admissions office.

I certify that all statements on this application are complete and true. I also understand that if I am admitted and do not enroll for the term to which I am admitted, I will need to reapply for admission. Submitted materials will not be returned nor duplicated.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email completed form to [highschool@chemeketa.edu](mailto:highschool@chemeketa.edu) OR  
Drop off at 4061 Winema Place, Bldg. 49, Salem, OR 97305 (please place in mailbox outside of front door)

The College is an equal opportunity/affirmative action employer and educational institution committed to an environment free of discrimination and harassment. Questions regarding sexual harassment, gender-based discrimination and sexual misconduct policies or wish to file a complaint contact the Title IX coordinator at 503-584-7323. For questions about equal employment opportunity and/or affirmative action, contact 503.399.2537. To request this publication in an alternative format, please call 503.399.5192.

**Underage Approval Form - (Ages 16-17)**

**Chemeketa High School Partnerships**  
4061 Winema Place, Bldg. 49, Room 102  
Salem, OR 97305  
Phone: (503) 399.5293  
Email: [highschool@chemeketa.edu](mailto:highschool@chemeketa.edu)



College Policy 5110 Procedure 5111 requires that this form be completed by students planning to enroll at Chemeketa Community College who are under the age of 18 and do not have a high school diploma or GED. Completion of this form is not required for students enrolling in College Credit Now classes that are offered at local high schools.

**Student**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_\_ Age: \_\_\_\_\_

Please indicate term in which you would like to enroll:  Summer (June)  Fall (Sept.)  Winter (Jan.)  Spring (March) Year: 20

Please indicate the program or classes in which you would like to enroll:

- College Credit Courses (Underage College Credit/Early College/Dual Credit)
- GED Options (HSP)
- Non-credit classes
- High School College Transition (HCT)
- GED preparation classes
- Expanded Options (EOP)
- GED testing only
- Community Education classes
- Specialized Programs - ED 216

Please indicate specific course you wish to enroll:

N/A

**Parent/Legal Guardian**

Print Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**High School or Home School Approval**

Referring High School/Home School: \_\_\_\_\_

Counselor/Administrator Signature: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

----- DO NOT WRITE BELOW THIS LINE -----

Released from Compulsory Education - Beginning Date: \_\_\_\_\_

Exemption from Compulsory Education for GED (student is released for one year) - Beginning Date: \_\_\_\_\_

Partial Release - Date: \_\_\_\_\_  Summer (June)  Fall (Sept.)  Winter (Jan.)  Spring (March)  
(Mo/Year)

Partial Release - Date: \_\_\_\_\_  
(Mo/Year)

Placement Tests:  Completed - Date: \_\_\_\_\_

Approved Course(s):


High School Partnerships Signature (credit and non-credit courses): \_\_\_\_\_

Community Education Signature (non-credit community education courses only): \_\_\_\_\_