**Diocesan Scholars Program**

**Student Commitment Form**

**and Parent/Guardian Permission Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student), understand:

* that my college courses may take place during the school day or possibly during the evening
* that my college courses may interrupt with my school schedule and require that I miss my after-school activities,
* that I will be responsible for transportation to and from the college campus,
* that I will be responsible for purchasing any class materials and/or textbooks,
* that I will need to maintain a B average in my courses in order to continue in the program in the spring.

Realistically, I would likely choose (circle): 1 or 2 courses in the fall semester and

 1 or 2 courses in the spring semester.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the parent/guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (student) understand the statements above and support my son’s decision to be in this program during the next academic school year.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Student Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian Date