

ANDREWS ACADEMY
College Enrichment Application

Name _____ I.D.# _____

Date _____ Grade _____

To the Academic Affairs Committee:

I have read the sections in the Andrews Academy Sourcebook concerning the College Enrichment Program. I understand the requirements for this program. I approve my son's daughter's application for the program. I understand that there may be additional tuition charges for participation in this program. As part of the registration procedure, the exact tuition charges are calculated and reported on the registration form, requiring both the student's and parent's signatures.

Reason for application:

Student Signature _____ **Date** _____

Parent/Guardian Signature _____ **Date** _____

Advisor _____ **Date** _____

Office Use Only:		
GPA _____	Total Credits to Date _____	Credits Needed _____
Achievement Tests and Scores _____		
Approve <input type="checkbox"/>	Deny <input type="checkbox"/>	By _____ Date _____
<i>Chairman, Academic Affairs</i>		