



Parent Permission and Consent Form

Dear Families:

We welcome your interest in College Now @ City Tech! For your child to be accepted this semester, you must read, complete and return this form and attend our mandatory student orientation.

Your son and/or daughter expressed interest in joining the *College Now Program at New York City College of Technology (City Tech)* Program this coming semester. The program, part of a City University/Board of Education collaborative to prepare students for college, is a wonderful opportunity available to students in NYC public high schools. The College Now website (online at https://www.citytech.cuny.edu/collegenow/) explains the program in more detail and if you ever have a question, please email us at collegenow@citytech.cuny.edu or call us directly at 718-260-5206.

Before we consider your child's application, your child will need your consent on a few items. After you carefully read and complete (sign) the form, please have your child return it along with the registration form, transcript and course selection form before the deadline (see above) to our office directly.

PERMISSION TO TRAVEL AND PARTICIPATE, YET HOLD HARMLESS

I, the parent/guardian of the student named below, hereby give my permission for my son/daughter to participate in College Now program initiatives, including the course described above, trips, and enrichment activities. I understand that my child is expected to travel unaccompanied to and from City Tech as well as to and from various scheduled field trips (may vary by class), and other enrichment activities.

I *agree not* to hold my son/daughter's high school or any of its employees or Board of Education or any of its employees or the City Tech or any of its employees or the City University of New York or any of its employees responsible for any expenses or injuries that my child may incur while engaged in this activity. I understand that my child is responsible for his/her behavior at all times.

I agree that in the event of an injury City Tech or New York City Board of education personnel in charge of this activity may act on my behalf in obtaining medical treatment for my child. I indicated below any permanent or temporary condition that should be known about my child:

(Write none, if applicable)_______.

PHOTO RELEASE

We are sending you this parental consent form to both inform you and request permission for your child's photo/image and personally identifiable information to be published on the City Tech or New York City Board of Education or College Now Program at City Tech's public internet. As you are aware, there are potential dangers associated with the posting of personally identifiable information on a web site since global access to the internet does not allow us to control who may access such information. These dangers have always existed; however, we as a program want to celebrate your child and his/her work. The law requires that we ask for your permission to use information about your child. Pursuant to law, we will not release any personally identifiable information without prior written consent from you as a parent or guardian. Personally identifiable information includes student names, photo or image, residential addresses, e-mail address, phone numbers and locations and time of class trips. If you, as the parent or

guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to College Now Program at City Tech Office of Collaborative Programs, and such a letter will take effect upon receipt.

I/we GRANT permission for the student's photo/image and all other personal identifiers listed	
above to be published by or on behalf of the College Nov	w Program at City Tech Office of Collaborative
Programs and/or New York City Board of Education pub	olic internet, or other media.
I/we DO NOT GRANT permission for photo/image that includes this student to be published by on behalf or on the College Now Program at City Tech Office of Collaborative Programs and/or New	
PARENT/GUARDIAN PLEDGE TO SUPPORT	
I, the parent/guardian of	_pledge to:
Be an active participant as much as my schedule	will permit (attend all orientation sessions and
mandatory meetings; volunteer at least once per	year).
 Periodically contact my child's high school guid 	ance counselor AND the College Now @ City
Tech representative for academic performance as	nd attendance update.
Encourage and help my child maintain a positive	e attitude about education.
Seek out assistance in supporting my child, as no	eeded.
Student's Name: (please print)	Current Grade level
High School:	
Parent/Guardian's Name (Please Print)	
Email Address of Parent/ Guardian:	
Phone Number of Parent/ Guardian:	
Signature of Parent/ Guardian:	Date
Emergency Contact Information	
Emergency Contact & Number:	Date
Relation to Student:	Date