

CONSENT FORM

SPRING
2026

Student Name:	
High School:	
Current Grade:	<u> </u>
Guidance Counselor:	
	Email:
I,Print Name of Parent/Guardian	, certify that I am the parent/guardian of the student named above and I am aware that
and I am aware that he/she is participally which is an instructional activities probable. Bedford Avenue, Brooklyn, New Yorkweek, after school. If the course takes site by various forms of public and probable understand that there may be risked.	ating in the City University of New York (CUNY) College Now Program or organ taking place at Medgar Evers College (MEC), located at 1650 k 11225. I am aware that my child's course(s) will take place once/ twice a place on MEC campus, I understand that my child may travel to the college ivate transportation. I understand that some courses may require field trips sks involved in my child's departure from his/her home or school without risks on behalf of my child and myself.
affiliation; and/or written and /or record of increasing awareness of the Colleg	w York (CUNY) to use my child's image or photograph, name, high school rded oral statements made in or about College Now, solely for the purposes ge Now program for other city students through CUNY's non-commercial College Now program and use on CUNY-TV and cuny.edu, in any manner ghout the world.
	Date:
Print Name of Parent/Guardian	Signature of Parent/Guardian
Parent Email Address:	
Parent Cell:	
In case of an emergency, please provi numbers: <u>Information should be PRI</u>	ide two (2) contact persons over the age of 18 with valid phone <u>INTED</u> .
1. Name:	Phone:
2. Name:	Phone:
If student is over the age of 18, they n	nay sign this application; parental consent/signature not required.