

UNIVERSITY OF MISSOURI HIGH SCHOOL

DIPLOMA PROGRAM APPLICATION

Mail, Fax, or Deliver to:

MU HIGH SCHOOL

28 Heinkel Hall - Columbia, MO 65211-4200

TELEPHONE: 573-884-3974 OR 1-855-256-4975 — FAX: 573-884-9665

WEB: muhigh.missouri.edu

— PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION —

Student's Name: _____
Last First Middle Initial

Birthdate: _____ Gender: _____
Month - Date - Year M - F

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Electronic Mail Address (E-mail), optional: _____

Name of Parent/Legal Guardian, if under 18: _____

Address, if different than above: _____ Telephone, if different than above: _____

City: _____ State: _____ Zip Code: _____

Have you previously enrolled in a MU High School independent study course? YES NO Mizzou Online ID _____

Name enrolled under, if different than above: _____

When do you hope to complete course requirements for a MU High School diploma? Date, if known: _____

Check One: _____ I plan to pursue a general diploma. OR _____ I plan to pursue a college preparatory diploma.

HIGH SCHOOLS PREVIOUSLY ATTENDED:

School Name and Address: _____

Grade Level(s): _____ Dates: _____ Credits Earned in Units: _____

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Grade Level(s): _____ Dates: _____ Credits Earned in Units: _____

MU HIGH SCHOOL requires an official transcript of all secondary school credit you have earned. Official transcripts must be sent directly to MU High School by the school(s) you have attended. Please have transcripts sent to:

REGISTRAR, University of Missouri High School
136 Clark Hall — Columbia, MO 65211-4200
or FAX to: 573-884-9665

HOME SCHOOLED STUDENTS: You must provide MU High School with a portfolio or records that include a list of subjects studied and textbooks used. **If you are under the age of 18**, you must supply verification that you are in compliance with your state's home schooling regulations; verification should accompany this diploma program application.

OTHER STUDENTS under the age of 18: You must have approval of a school official from the district in which you reside. See back side of this diploma program application for **Local School Approval Form**.

Briefly describe your reasons for deciding to earn your high school diploma through the MU High School diploma program:

Do you have a career goal? _____ If yes, describe it briefly: _____

What is your present occupation, if applicable? _____

If employed, how many hours per week do you work? _____

How did you learn about the MU High School diploma program? _____

SIGNATURE: _____ DATE: _____

(student signature if over age 18 / parent signature if under age 18)

In order to complete this application to MU High School, please make sure you have included the following:

- Official Transcripts (requested from schools previously attended)
- If under the age of 18, the permission of your local school district , **OR** if home schooled, written notification that your family is in compliance with your state's home schooling regulations (see Local School Approval Form below).
- \$25 Application Fee (attach check or write credit card number here) _____ exp. date _____ 3 digit code _____

Students under age 18 must complete one of the sections below (A or B).

A. LOCAL SCHOOL APPROVAL FORM

This approval must be completed by a school official (superintendent or principal) from the district in which the student resides.

STUDENT NAME _____ *has approval from* _____

SCHOOL DISTRICT NAME AND LOCATION _____

to enroll in the University of Missouri High School diploma program.

SIGNATURE: _____

PRINT NAME: _____

TITLE: _____ TELEPHONE: _____

B. HOME SCHOOL COMPLIANCE STATEMENT

We certify that our family is in compliance with our state's home school laws.

PARENT SIGNATURE: _____ DATE: _____



MU HIGH SCHOOL

University of Missouri