



Adult Education Enrollment Information

Student Name: _____ **SID (Office Use):** _____

Program: _____ **Date of Birth:** _____ **Under 18?:** Yes No

Residential Address:

Street: _____

City: _____ **State:** _____ **Zip:** _____

Mailing Address (if different from above):

Street: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____

Work Phone: _____ **Email (most checked):** _____

Emergency Contact (Parent/Guardian Contact if Under 18/English-Fluent Support if ESL):

Name: _____ **Relation:** _____

Phone: _____ **Email:** _____

Class Time Preference¹ (check all that apply): Morning Late Morning Early Evening Evening
Helping Hands Corrections Program: VM NVM VW NVW SP

¹ Classes are subject to availability of space. If a class is full, the student may need to pick another section or be placed on a waitlist if they are unavailable to attend an open section.

ORIENTATION: Students are required to attend their 1st day In-Classroom to meet the teacher and receive an orientation. It is **STRONGLY encouraged** that students attend the In-Classroom learning experience regularly for maximum learning benefit and resources.

VIRTUAL CLASSROOM: To attend via Virtual-Classroom, which is only available in select programs and sections, you **MUST** have reliable internet access and a working laptop or desktop computer with webcam and microphone as well as documented approval from your instructor in FOCUS. Under-18 students must have documented permission from their parent/guardian before being allowed to attend virtually. FTC reserves the right to revoke virtual learning at any time.

Returning Student Only:

- 1. Have you had any changes to Employment Status? Yes No
- 2. Are you a Single Parent or Single Pregnant Woman? Yes No
- 3. Do you qualify as a Displaced Homemaker? (Registrar will provide details)
- 4. Do you qualify for any WIOA related items? (Registrar will provide details)
- 4a. Are you a Youth in Foster Care (including aged out)? Yes No

I verify that all of the information above is current and correct, and I understand that it is my responsibility to update FTC immediately if any of the above information changes.

Student Signature: _____

DATE: _____

Parent/Guardian Signature (if applicable): _____

DATE: _____



Adult Education Student Expectations & Disclosures

Student Name: _____ **SID (Office Use):** _____

Campus Handbook:

- I acknowledge that it has been explained to me how to access the Campus Handbook on the FTC website, and that I agree to adhere to all policies therein. The FTC Campus Handbook can be viewed here: <https://www.flaglertech.edu/student-services/student-resources>

Student Initial: _____ **Parent/Guardian Initial (If Applicable):** _____

Attendance Policy (CH, pg25):

- I understand that consistent attendance is critical to educational success.
- If I am absent from campus class six consecutive days or do not meet my time on task requirements for online classes, I will be withdrawn from that class.
- If I am withdrawn from a class, I understand that seating is limited and I may have to choose another available class section if the dropped section is full.
- I will notify my instructor if I plan to be absent from class for any length of time or if for any reason I need to stop or suspend my attendance in the program.
- If enrolled in a program with a Virtual Learning, I understand that attending virtually is a privilege, and that failure to meet attendance and independent learning expectations may result in revocation of Virtual Learning privileges during the semester and/or as a future enrollment option.

Student Initial: _____ **Parent/Guardian Initial (If Applicable):** _____

Testing Expectations & Agreement (CH, pg18-19)

- I understand that I am required to be tested academically as part of the registration process and may be required to test periodically to determine academic progress.
- I understand that testing as requested is a mandatory part of the adult education program, and that failure to test when asked to do so may result in not being allowed to continue instruction.

Student Initial: _____ **Parent/Guardian Initial (If Applicable):** _____



Classroom Expectations (CH, pg34), Dress Code & Appearance (CH, pg35), & Code of Conduct (CH, pg60-71)

- I understand that no cell phones or other electronic devices are to be used in the classroom without specific permission by the teacher.
- I will wear a school-provided name ID badge above waist at all times while on campus.
- I will sign in to class every time I enter the in-classroom environment and sign out every time I leave the in-classroom environment.
- I agree to adhere to the FTC Dress Code & Appearance standards that are detailed in the FTC Campus Handbook including: *No "short shorts" or "cut-offs" more than 4" above the knee, No sunglasses can be worn within buildings, No exposed undergarments, No chains or jewelry hanging outside of clothing, No inappropriate messages on clothing, Must wear shoes.*
- I understand that FTC is a tobacco, alcohol, and controlled substance-free campus, and that there is a zero-tolerance policy in place for non-compliance.

Student Initial: _____ **Parent/Guardian Initial (If Applicable):** _____

Disciplinary Process (CH, pg35)

- I understand that there is a progressive disciplinary process as well as certain offenses that can merit more substantial action as defined in the FTC Campus Handbook.
 1. *Verbal Warning - Instructor*
 2. *Student one-on-one conference - Instructor*
 3. *Student Services conference (parents must attend with high school student) AGE students – AGE Student Services Manager or Coordinator CTE students – Student Services Manager or Coordinator*
 4. *Student Expectation Contract conference– student signs contract Program facilitator, student, and administration*
 5. *Referral to Discipline Committee – Meeting with Director, Coordinator, Program Facilitator, student, and parent if applicable*
- I agree to and acknowledge the Complaint and Grievance Procedures in the FTC Campus Handbook.

Student Initial: _____ **Parent/Guardian Initial (If Applicable):** _____

Learners Rights & Responsibilities (CH, pg15)

- I have read the Explanation of Learner’s Rights and Responsibilities as defined in the Students with Disabilities section of the FTC Campus Handbook, and know how to reach the FTC Campus 504 Disability Advisor if applicable.

Student Initial: _____ **Parent/Guardian Initial (If Applicable):** _____



Informed Consent Statement – Surveys (CH, pg53)

- I understand that students will be asked to participate in surveys designed to improve teaching methods and help FTC understand student needs. Surveys are voluntary and a student may opt out of taking surveys or any portion of a survey if he/she desires.

Student Initial: _____ *Parent/Guardian Initial (If Applicable):* _____

AGE Refund Policy (CH, pg30)

- If Flagler Technical College cancels a class prior to the start of the semester, FTC will refund 100% of money collected. No refunds will be given for any other reason, including failure to show for scheduled pre-testing assessments or choosing not to attend before or after the first scheduled day of class.

Student Initial: _____ *Parent/Guardian Initial (If Applicable):* _____

I/We agree to all of the above expectations, policies, and disclosures, and I understand that I am responsible for understanding and adhering to campus rules in the FTC Campus Handbook.

Student Print Name: _____

Student Signature: _____ **DATE:** _____

Parent/Guardian Print Name (If applicable): _____

Parent/Guardian Signature (If applicable): _____ **DATE:** _____



Under 18 Parent/Legal Guardian* Verification and Additional Expectations (if applicable)

- I give permission for my son/daughter, named in this document, to legally withdraw from his/her former high school and enroll in the GED preparation program at FTC. I understand that prior to taking the GED, under-18 students must enroll in and attend classes for a minimum of 12 hours and verify GED-Ready status in all 4 GED competency areas through FTC approved testing measures. I also understand that under-18 students are expected to attend FTC daily until they pass all 4 GED competency sections and are officially considered a completer. Approval for a student to obtain an under-18 waiver is required from the instructor, facilitator, and the FTC Coordinator and/or FTC Director.
- I understand that daily attendance is a mandatory expectation for under-18 students, and that FTC's policy is to contact a parent/guardian each day of non-attendance. Parents/Guardians, not the student, are responsible for letting FTC know if an under-18 student will not be attending class for any reason.
- In addition to normal rules applying to student withdrawal and re-entry, I understand that under Florida Statute 322.91, students between the ages of 16 & 18 years of age who are in violation of the attendance policy must be reported to the Department of Highway Safety and Motor Vehicles, who have the authority to REFUSE or REVOKE the student's driving privileges until re-entry and 20 consecutive days of attendance**. ***Students who do not meet attendance requirements after re-entry will not be permitted a HSMV 72870 for driver's license reinstatement.*

**If legal guardian, proof of legal guardianship must be supplied.*

I/We agree to all of the above expectations, policies, and disclosures regarding under-18 students.

Student Print Name: _____

Student Signature: _____

DATE: _____

Parent/Guardian Print Name (If applicable): _____

Parent/Guardian Signature (If applicable): _____ **DATE:** _____



Authorization for Release of Information
in accordance with Family Educational Rights and Privacy Act (FERPA)

Student Name: _____ SID#: _____
First, Middle, Last

Phone: _____ Email: _____

Authorization

I authorize Flagler Technical College (FTC) to release information as indicated below.

1. Name: _____ Relation: _____

Phone: _____ Email: _____

2. Name: _____ Relation: _____

Phone: _____ Email: _____

List two individuals/agencies on this form ONLY, if you intend to grant the same type of information access. Otherwise, please complete a separate form for each.

Type of Information Access

- No Access (Except where allowed by 34CFR-99.31 and FERPA)
- Academic (included but not limited to) grades, enrollment status
- Financial Aid (included but not limited to) satisfactory academic progress (SAP), Free Applications for Federal Student Aid (FAFSA) information, award amount
- Student Account: (included but not limited to) account balances, account charges, billing, payment
- Disability-related: (included but not limited to) type of disability, accommodation needs, auxiliary aids
- Disciplinary-related: (included but not limited to) academic and other disciplinary processes
- Remove all access

This authorization will remain in effect indefinitely, until the student named above notifies the current FTC program supervisor of the last program attended. All notifications must be submitted in writing.

I acknowledge that I may revoke this "Authorization for Release of Information" in **writing** at any time by presenting such authorization to the FTC Registrar. I also acknowledge and agree that any disclosure of records and/or information made prior to my written revocation shall not constitute a violation of my right to privacy under federal and state law.

Student's Signature

Date Signed

Please read the information regarding FERPA on the back of this form.

Office Use Only: Entered by _____ **Date Processed:** _____

ANNUAL FERPA NOTIFICATION

Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. Further details may be found in Policy and Procedures under the Family Educational Rights and Privacy Act (FERPA) and at <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

These rights include:

The right to inspect and review the student's education records within 45 days of the day the Institute receives a request for access. Students should submit to the Program Facilitator of their department, written requests that identify the record(s) they wish to inspect. The Program Facilitator of the department will make arrangements for access and notify the student of the time and place where the records may be inspected.

The right to request an amendment of the student's education records that the student believes is inaccurate or misleading. Students may ask the Institute to amend a record that they believe is inaccurate or misleading. They should write to the Program Facilitator of their department, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the Institute decides not to amend the record as requested by the student, the Institute will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

The right to consent to disclosure of personally identifiable information contained in the student's educational records, except to the extent that FERPA authorizes disclosure without consent. FERPA allows schools to disclose those records, without consent, to the following parties, or under the following conditions

(34CFR-99.31):

- School officials with legitimate educational interest**
- Other schools to which a student is transferring
- Specified officials for audit or evaluation purposes
- Appropriate parties in connection with financial aid to a student
- Organizations conducting certain studies for or on behalf of the school
- Accrediting organizations
- To comply with a judicial order or lawfully issued subpoena
- Appropriate officials in cases of health and safety emergencies
- State and local authorities, within a juvenile justice system, pursuant to specific State law

** A school official is defined as a person employed by the Institution in an administrative, supervisory, academic, or support staff position (including law enforcement unit and health staff); a person or company with whom the Institution has contracted (such as an attorney, auditor, or collection agent); a person assisting another school official in performing his or her tasks.

A school official has a legitimate educational interest if the official needs to review an educational record in order to fulfill his or her professional responsibility.

Disclosure of Directory Information. Flagler Technical College has designated the following categories of Information as "directory information: student's name, address(es), telephone number(s), email address(es), date and place of birth, previous educational institution(s), program of study, enrollment status, anticipated graduation date, honors and awards, photographic/digital/video images and dates of attendance. This information will be subject to public disclosure unless a student requests in writing to prevent disclosure of directory information.

The right to file a complaint concerning alleged failures by FTC to comply with the requirements of FERPA, with: Family Policy Compliance Office, U.S. Department of Education, 400 Maryland Avenue SW, Washington, D.C. 20202-460

Career, Technical, Adult and Community Education



FLAGLER TECHNICAL COLLEGE

FLAGLER TECHNICAL COLLEGE
WORKFORCE EDUCATION 504

EXPLANATION OF LEARNER RIGHTS and RESPONSIBILITIES

It is the district's responsibility to inform all students that sometimes accommodations may be available for basic skills testing as well as instruction, such as extended time or testing in a separate room.

Persons with documented disabilities, including but not limited to a learning disability, attention deficit disorder, emotional, orthopedic impairment, vision or a hearing impairment, are protected under law with the right to accommodations in instruction and testing.

EACH STUDENT has the right:

- To participate in adult education programs, services, and activities without discrimination
- To choose whether to disclose a disability
- To receive reasonable accommodations in class and on tests
- To meet with staff to discuss his/her needs

EACH STUDENT has the responsibility:

- To self-identify and notify a teacher or registrar if he/she needs or requests accommodations for testing or instruction
- Provide documentation of their disability. Documentation is required and will be kept strictly confidential.

Possible accommodations may include but are not limited to:

- Extra time for testing
- Frequent breaks
- Private work area
- Sign language interpreters
- Alternate test formats (Braille, audiotape, large)
- Assistive devices

NOTE: Signed and Acknowledged via Online Application and Student Expectations Form

Flagler Technical College prohibits any policy or procedure which results in discrimination on the basis of age, color, disability, gender identity, gender expression, national origin, marital status, race, religion, sex or sexual orientation. Individuals who wish to file a discrimination and/or harassment complaint may call the Executive Director, Benefits & EEO Compliance at (904-547-3282) or Teletype Machine (TTY) (904-201-4792). Individuals with disabilities requesting accommodations under the Americans with Disabilities Act Amendments Act of 2008, (ADAAA) may call Equal Educational Opportunities (EEO) at (904-547-3282) or Teletype Machine (TTY) (904-201-4792).