

# City College of San Francisco College for Teens

88 Fourth Street  
San Francisco, CA 94103  
PH: 415.267.6594

**If the box below is checked, an IEP report is REQUIRED for admission to the program.**

**Please check appropriate box(es):**

- First Time Student     
  Returning Student     
  **I have an IEP**

**Student Name:** \_\_\_\_\_  
Last
First
Middle

**Ethnicity:** Please select ONE

- |   |   |
|---|---|
| _____ American Indian/Alaskan Native<br>Tribal affiliation: _____<br>_____ Black/African American<br>_____ Chicano/Mexican American<br>_____ Latino/Other Spanish-American<br>_____ Pilipino/Filipino<br>_____ Chinese/Chinese-American | _____ East Indian/Pakistani<br>_____ Japanese/Japanese-American<br>_____ Korean<br>_____ Polynesian<br>_____ Other Asian<br>_____ White/Caucasian<br>_____ Other (please specify) _____ |
|---|---|

**HO#** \_\_\_\_\_ (MANDATORY for SFUSD students)

**Birthdate:** \_\_\_\_\_  
Date
Month
Year

**Address:** \_\_\_\_\_  
STREET
CITY
ZIP CODE

**High School:** \_\_\_\_\_  
 NAME OF HIGH SCHOOL

PRINT

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Day/Evening Phone:** \_\_\_\_\_

**\*Emergency Contact/Phone:** \_\_\_\_\_

**Relationship to Student:** \_\_\_\_\_

\* Please note, if Parent/Guardian is unreachable, the Emergency Contact will be called.

Class # or Block #	Course Title	Fee

**Payment Methods (NO CASH):**

- 1. Check, Cashiers Check or Money Order payable to "CCSF College for Teens" or
- 2. Credit Card Payment

VISA       MASTERCARD

**16-digit Credit Card Number** \_\_\_\_\_ **CVV** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **Billing Zip Code:** \_\_\_\_\_

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**NAME OF CARDHOLDER** \_\_\_\_\_ **CARDHOLDER'S SIGNATURE** \_\_\_\_\_

**Relationship to Student** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Refund Policy: NO EXCEPTIONS**

Refunds are only issued under the following circumstances: **1. A full refund** is automatically issued if a class is canceled or **2. A partial refund** is issued if a written class withdrawal is received **PRIOR** to the **END** of the **1st day** of Instruction. A **\$100** non-refundable fee applies if the class is NOT canceled and the student/parent chooses to drop the class. **Check refunds** take from **8-10** weeks to process.

**Credit Card refunds** take **3-4** weeks to process. **REFUND REQUESTS MUST BE DONE IN PERSON @ THE OCEAN AVENUE CAMPUS, BUNGALOW 716. NO EXCEPTIONS.**

**Absence/Tardy Policy: NO EXCEPTIONS**

**NO** absences are allowed. Prior to registering, any planned absences (i.e., court dates, doctor's appointments, mandatory college orientations, athletic tournaments, etc., **MUST** be **PRE-APPROVED** by the Dean or Director. Any last minute absences **NOT APPROVED** by the Dean or Director may result in a lower final grade or dismissal from the program with **NO REFUND**. **Vacations ARE NOT excused absences. NO permission will be given for family vacations, reunions or long weekends.**

Any tardy exceeding 15 minutes will be counted as one unexcused absence. Three tardies under 15 minutes will be counted as one unexcused absence. If a student exceeds our **NO** absence policy, he/she will be automatically dropped from the class with **NO REFUND** and **NO LETTER GRADE**. Excused absences are granted on a case by case basis by the Director or Dean (**NOT the instructor**).

**Lost Book Policy: NO EXCEPTIONS**

A cash fee of **\$100** will be billed to the Parent/Guardian for any lost book(s). If the bill remains unpaid when class has ended, the student's grade will be withheld and a letter will be sent to the student's high school. **IF THE STUDENT DOES NOT BRING HIS/HER REQUIRED TEXTBOOK(S) ON THE DAY OF THE FINAL, NO FINAL WILL BE GIVEN TO THE STUDENT UNTIL THE BOOK IS RETURNED TO THE OFFICE @ THE OCEAN AVENUE CAMPUS, BUNGALOW 716.**

**NO BOOK; NO FINAL; NO EXCEPTIONS.**

**\*Final Exams for ALL classes are given on the final day of instruction.**

**Please read above information carefully and sign below.**

**WE** have read, understand and accept the Refund, Absence/Tardy and Lost Book Policies.

\_\_\_\_\_  
PARENT/GUARDIAN Signature

\_\_\_\_\_  
STUDENT Signature

\_\_\_\_\_  
DATE

# No Tolerance Policy

1. **NO** graffiti of any kind
2. **NO** eating and drinking in the classrooms.
3. **NO** gang colored attire (RED or BLUE); caps; beanies; sunglasses; bandanas of any kind; walkmans, radios, iPods, MP3 players; hand-held games, cell phones and other electronic devices. **CCSF RESERVES THE RIGHT TO CONFISCATE ALL THE ITEMS LISTED ABOVE UNTIL THE END OF THE SUMMER SESSION.**
4. **NO** leaving the classroom or CCSF grounds during class time without the Dean's/Director's/Staff's permission.

Failure to comply with the rules listed above; CCSF's Rules of Student conduct; and SFUSD Disciplinary Rules may result in the student's withdrawal/expulsion from the College for Teens Program either temporary or permanent.

**Please read the above information carefully and sign below.**

**WE** have read, understand, and accept the No Tolerance Policy and the consequences resulting if the student does not abide by the rules.

\_\_\_\_\_  
PARENT/GUARDIAN Signature

\_\_\_\_\_  
STUDENT Signature

\_\_\_\_\_  
DATE

## **Summary of Understanding College for Teens Policies and Procedures**

**WE have read, understand, and accept the following:**

**REFUND POLICY** on page 2

_____	_____	_____
PARENT/GUARDIAN Signature	STUDENT Signature	DATE

**ABSENCE/TARDY POLICY** on page 2

_____	_____	_____
PARENT/GUARDIAN Signature	STUDENT Signature	DATE

**LOST BOOK POLICY** on page 2

_____	_____	_____
PARENT/GUARDIAN Signature	STUDENT Signature	DATE

**NO TOLERANCE POLICY** on page 3

_____	_____	_____
PARENT/GUARDIAN Signature	STUDENT Signature	DATE

# City College of San Francisco's

## Rules of Student Conduct

Disciplinary sanctions for the below listed offenses shall include, but are not limited to, warning; verbal and/or written reprimand; a failing grade in an assignment, test, or class in proven cases of cheating or plagiarism or other academic dishonesty; disciplinary probation; ineligibility to participate in extra-curricular activities; removal from class by the instructor for no more than two class meetings; removal from an instructional laboratory, study facility, or other supervised student activity by the designated site supervisor for no more than two class sessions or meetings; suspension from classes by the Chancellor (or designee) for up to the remainder of the school term or from all classes and activities of the District for one or more terms; and expulsion.

- 1.** Continued disruptive behavior, continued willful noncompliance, willful and persistent profanity or vulgarity, or the open and/or persistent defiance of the authority of, or persistent abuse of, District personnel or officials acting in the performance of their duties;
- 2.** Assault or battery, abuse, extortion, or any threat of force or violence directed toward any member of the District community (student and employees) or District visitor engaged in authorized activities;
- 3.** Academic or intellectual dishonesty, such as cheating or plagiarism. Cheating is defined as taking an examination or performing an assigned, evaluated task in a dishonest way, such as by having improper access to answers. Plagiarism is defined as the unauthorized use of the language and thought of another author and representing them as your own;
- 4.** Dishonesty, such as theft or the unlawful taking of property from the rightful owner, or knowingly furnishing false information to the District, or forgery, alteration, or misuse of District documents, records, or identification;
- 5.** Willful misconduct which result in injury or death to a student or District personnel or which results in cutting, defacing, or other injury to any real or personal property owned by the District; or injury to property belonging to a member of the District community or to an authorized District visitor while on District property;
- 6.** Unauthorized entry to or use of District facilities, supplies, equipment, including computing networking or information resources;
- 7.** Obstruction or disruption of classes, computer laboratories or study facilities such as the Library or the Learning Assistance Center, student activities, administration, disciplinary procedures, governance processes, or other authorized District activities;
- 8.** The use, sale, distribution or possession of, or presence on campus while under the influence of alcoholic beverages, narcotics, or other dangerous or hallucinogenic drugs or substances including marijuana and lysergic acid diethylamide (LSD) or any controlled substance (except as expressly permitted by law and evidenced by medical authorization) or use, sale, distribution of any poison classified as such by Schedule D in Section 4160 of the Business and Professions Code;
- 9.** Willful or persistent smoking in any area where smoking has been prohibited;
- 10.** Violation of District rules and regulations including those concerning student organizations, the use of college facilities, or the time, place and manner of public expression or distribution of materials;

**11.** Violation of the District's Sexual Harassment Policy (see appropriate sections of the CCSF Catalog for a complete version of the Policy);

**12.** Violation of the District's Computer Usage Policy (see appropriate sections of the CCSF Catalog for a complete version of the Policy);

**13.** Disorderly, lewd, indecent, obscene, or offensive conduct or expression which interferes with the District's primary educational responsibility;

**14.** Possession while on District property or at any District sponsored function, of any of the following weapons (except for persons given permission by the Chancellor or designee as members of law enforcement operations); any instrument or weapon of the kind commonly known as black-jack, fire bomb, billy club, sandclub, metal knuckles; any dirk, dagger, or knife having a blade longer than two inches; any switchblade longer than two inches, any razor with an unguarded blade; any firearm (loaded or unloaded) such as a pistol, revolver, rifle, automatic or semi-automatic weapon; any metal pipe or bar used or intended to be used as a club; or any other item, such as a chain, used as threat to do bodily harm;

**15.** Failure to comply with directions of District officials, faculty, staff or campus police officers who are acting in performance of their duties;

**16.** Persistent, serious misconduct where other means of correction have failed to bring about proper conduct.

*Suspension or expulsion of a student shall be accompanied by a hearing to determine if good cause warrants such suspension or expulsion. Good cause shall include, but is not limited to, conduct identified above as prohibited.*

Procedures for implementation of these rules shall be adopted by the Chancellor or designee.

**For San Francisco Unified School District (SFUSD) Student Use Only**

PERMISSION TO APPLY TO

City College of San Francisco

**College for Teens, 88 Fourth Street, San Francisco, CA 94103**

PH: 415.267.6594

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Date \_\_\_\_\_ SFUSD High School \_\_\_\_\_ Student has IEP?  Yes  No

Student (print last name, first name) \_\_\_\_\_ HO # \_\_\_\_\_

During Summer 2009, I wish to take the following courses at College for Teens for **high school credit only**:

<i>Course Title</i>	<i>Credits</i>
_____	_____
_____	_____
_____	_____

**Parent's Signature** \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_ Date \_\_\_\_\_

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Based on my transcript evaluation, I approve of the above named student's course selection for College for Teens for Summer 2009.

Print  
Counselor's Name \_\_\_\_\_ Counselor's Phone # \_\_\_\_\_

**Counselor's Signature** \_\_\_\_\_ Date \_\_\_\_\_

**For NON-SFUSD Student Use Only**

PERMISSION TO APPLY TO

City College of San Francisco  
**College for Teens, 88 Fourth Street, San Francisco, CA 94103**  
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<i>Course Title</i>	<i>Credits</i>
_____	_____
_____	_____
_____	_____

**Parent's Signature** \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_ Date \_\_\_\_\_

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Based on my transcript evaluation, I approve of the above named student's course selection for College for Teens for Summer 2009.

Print  
Counselor's Name \_\_\_\_\_ Counselor's Phone # \_\_\_\_\_

**Counselor's Signature** \_\_\_\_\_ Date \_\_\_\_\_