

STUDENT AGE WAIVER

Date	_
I hereby waive the 17-year-old mini	mum age requirement of the Community Colleges of
Colorado for(student's name)	, Social Security Number,
and DOB(date, month, year)	, so that s/he can enroll in (course number and title)
for the Semeste	er of 200
enroll in this class with the understateourse has no pre-requisites; 3) Couconditions; and 4) This course prim	is/her parent(s) acknowledge said student is being allowed to nding that: 1) This is not a core or transfer course; 2) This rse is being taken by and paid for by student/parent under these arily benefits the student's understanding of and participation fitness, and serves a community need for programming its residents.
(Signature of Student)	(Date)
(REQUIRED signature of parent/guardian)	(Date)