



# SHARED PROGRAMS APPROVAL FORM BUCKS COUNTY COMMUNITY COLLEGE

Attention Student Accounts Office:

Name: \_\_\_\_\_ Student #: \_\_\_\_\_

Is eligible to participate in our Shared Programs, as he/she is enrolled and qualifies in the following curriculum:

Chef Apprenticeship (2098, 2056) \_\_\_\_\_

Fine Woodworking (1187) \_\_\_\_\_

Furniture and Cabinet Making (3187) \_\_\_\_\_

Historic Preservation (3127) \_\_\_\_\_

Hospitality (2022, 2101, 2171, 3172) \_\_\_\_\_

Paralegal (2128, 3129) \_\_\_\_\_

Sport Management (1154) \_\_\_\_\_

Meeting, Convention and Event Planning (2171, 3172) \_\_\_\_\_

I wish to enroll in the following course(s) for \_\_Fall \_\_Winter \_\_Spring \_\_Summer:

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_

In addition, I agree to the release of any information necessary to process financial aid including grade transcripts. I realize that this Shared Program agreement applies only to that curriculum which is listed above. I understand that any course change, such as a drop/add must be approved by the Area Coordinator and a new approval form **MUST** be submitted to Student Accounts, Links Pavilion, 1<sup>st</sup> Floor.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Shared Program approval has been granted to the above student for the \_\_\_\_\_ 20\_\_ semester.

Area Coordinator \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Note to student: For the Chef Apprenticeship Program, only residents from Montgomery, Philadelphia and Delaware counties are eligible for in-county tuition. For the other programs, the rate is for all PA residents. You **MUST** present this form at registration, either in person or by mail. All shared program information is input **AFTER** the semester begins.