

# UNIVERSITY OF MISSOURI HIGH SCHOOL

## DIPLOMA PROGRAM APPLICATION

Mail, Fax, or Deliver to:

### MU HIGH SCHOOL

136 Clark Hall - Columbia, MO 65211-4200

TELEPHONE: 573-882-2491 OR 1-800-609-3727 — FAX: 573-884-9665

WEB: [cdis.missouri.edu](http://cdis.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 CDIS ID, if known: \_\_\_\_\_

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: \_\_\_\_\_

School Name and Address: \_\_\_\_\_

Grade Level(s): \_\_\_\_\_ Dates: \_\_\_\_\_ Credits Earned in Units: \_\_\_\_\_

School Name and Address: \_\_\_\_\_

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School Name and Address: \_\_\_\_\_

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**

A PROGRAM OF MU EXTENSION  
**University of Missouri**