

Local School Approval Form

1. Student Information

Student First Name	Student Last Name	UNHS ID (optional)	
List courses to be approved or write "All"			
1.		5.	
2		6.	
3		7.	
4.		8.	
2. Proctor Information			
Proctor First Name	Proctor Last Name	Email Address	
Organization		Position or Job Title	
Address: School/Business Home		City	
State/Province	Zip/Postal Code	Country	
	17	Related to Student? Yes No How?	
Phone: Work Home Cell	Fax (Optional)	venden in 2inneuii; les lon lions;	
3. Courses & Proctor Approved By	7:		
Approver First Name	Approver Last Name	Email Address	
Organization		Position or Job Title	
School Address		City	
State/Province	Zip/Postal Code	Country	
Phone: Work Home Cell	Fax (Optional)		
4. Signatures (Please sign on the app	ropriate line below. This form	n will not be processed without handwritten signatures.)	
prover Signature		Date	
	*Signature must be ha	*Signature must be handwritten	
Parent Signature (if student is under the age of 18)	*Signature must be ha	Date ndwritten	
Student Signature (if student is 18 or older)		Date	
•	*Signature must be ha	ndwritten	

Please allow 2-3 business days for processing. Send this completed form to:

Mail: University of Nebraska High School 1500 U St, Ste 200 PO Box 880633 Lincoln, NE 68588-0633 Fax: (402) 472-1901 Email: highschool@nebraska.edu Phone: (402) 472-3388 Toll-Free (866) 700-4747

