

Delivering Academic Opportunities Worldwide For Over 90 Years

LOCAL SCHOOL APPROVAL FORM

1. STUDENT INFORMATION

Student First Name	Student Last Name	UNH	S 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
Phone: Work Home Cell	Fax (Optional)	Related to student? Yes No How?

3. COURSES AND PROCTOR APPROVED BY:

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 appropriate line below. This form will not be processed without handwritten signatures.)					
Approver Signature	*Signature must be handwritten	Date			
Parent Signature (student is under the age of 18)	*Signature must be handwritten	Date			
Student Signature (student is 18 or older)	*Signature must be handwritten	Date			
Please allow 2-3 business days to process. Send this completed form to:					

UNIVERSITY OF NEBRASKA HIGH SCHOOL

Online

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