



Parent/Guardian Notification and Consent

Please Choose One:

TAH 71: Introduction to Professional Food Service

I am aware that my child is participating in the Kingsborough College Now Saturday Program at Kingsborough Community College located at 2001 Oriental Blvd, Brooklyn, NY from September 14, 2019 through December 14, 2019 from 9:00 a.m. to 12:00 p.m. I am aware that my child will participate in a 3-credit course, TAH 71: Introduction to Professional Food Service, without tuition and book costs and students will spend time learning various components of the professional food service industry. Subjects will include the history, scope, classification, trends, food service management tools, customer service and basic quantitative reasoning as it relates to food services.

POL 66: Constitutional Law and Criminal Justice

I am aware that my child is participating in the Kingsborough College Now Saturday Program at Kingsborough Community College located at 2001 Oriental Blvd, Brooklyn, NY from September 14, 2019 through December 14, 2019 from 9:00 a.m. to 12:00 p.m. I am aware that my child will participate in a 3-credit course, POL 66: Constitutional Law and Criminal Justice, students will be introduced to the United States Supreme Court decisions and opinions in several major areas of constitutional law with a focus on the Criminal Justice system.

PSY 11: General Psychology

I am aware that my child is participating in the Kingsborough College Now Saturday Program at Kingsborough Community College located at 2001 Oriental Blvd, Brooklyn, NY from September 14, 2019 through December 14, 2019 from 9:00 a.m. to 12:00 p.m. I am aware that my child will participate in a 3-credit course, PSY 11: General Psychology, without tuition and book costs and students will focus on subjects including historical background, fields and divisions, scientific methods, biological underpinnings of thought and behavior, learning and memory.

Parent/Guardian Acknowledgement

I acknowledge and consent to the below named student's participation in this program. I understand that he/she may have to travel to and from the college and various field trip sites by various forms of transportation. I understand that there may be risks involved in my child's departure from his/her home, school or college without adult supervision, and I assume those risks on behalf of my child and myself.

Print Name of Student

High School

Signature of Parent/Guardian

Date

Print name of Parent/Guardian

Date

Mailing Address (Street)

Borough

State

Zip

Home phone #

Cell phone #

Email Address

Name of Emergency Contact

Emergency contact phone #

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