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### NEW JERSEY CITY UNIVERSITY AND MEMORIAL HIGH SCHOOL

11/21/24

		Purpose
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located at 2039 Kennedy Boulevard, Jersey City, New Jersey 07305 (hereinafter referred to as University) and the Memorial High School of West New York (hereinafter referred to as High School) are able to take undergraduate University courses and will additionally utilize the facilities located at the University. The following incorporates the agreement and understanding of both parties.

The goals of this agreement are to:

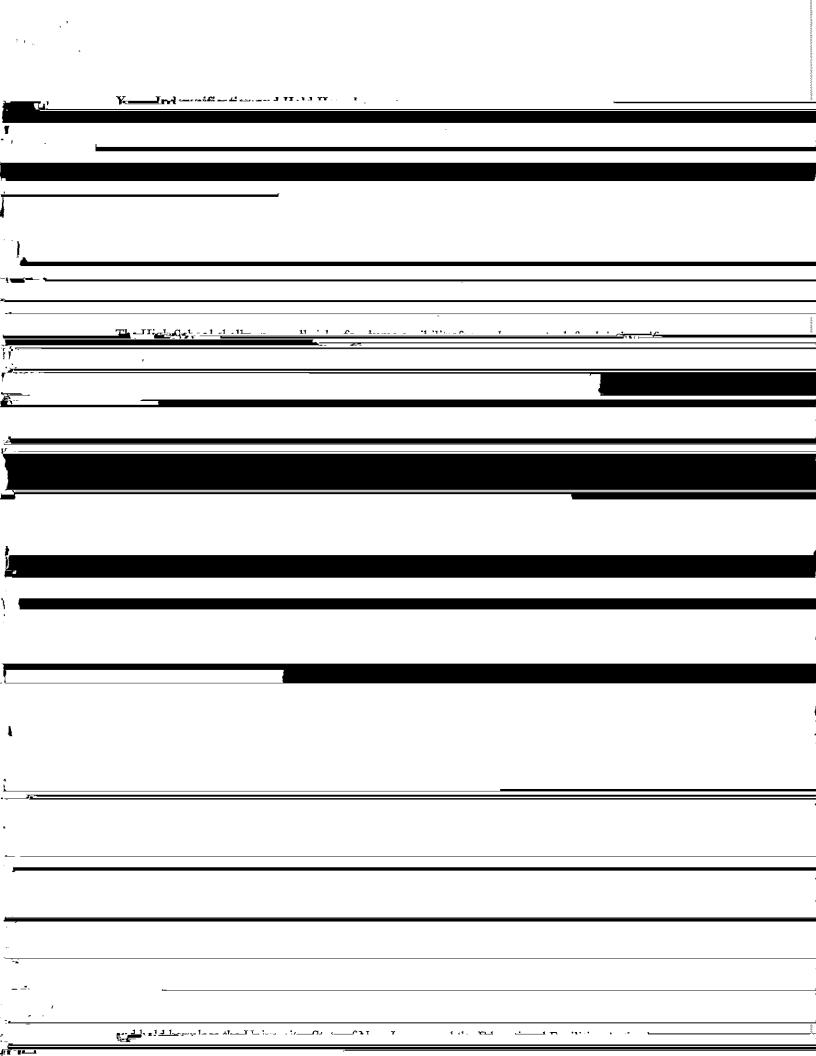
A. Enable High School students to be admitted as dual-enrolled students and enroll at

## m. **Program Course Offerings and Instruction** A. High School instructors teaching University courses as part of the High School curriculum are required to meet the University's educational requirements.

# **Dual-enrolled Courses Offerings** The courses will run based on the University's schedule Selected abidants may arrell in the

	only one institution will process a cost of misses due to a devillement.
	only one institution will process a case of misconduct and will create a process for
	reporting to the other when the institution has undertaken student conduct actions.
	B. The High School students have a right to avail themselves of academic grievance
	and appeal procedures in matters regarding grading course requirements
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	attendance, academic integrity, and other educationally related complaints.
<b>.</b>	VIIIMedical/Emergency Core
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	It is understood and agreed that:
	A. The University is responsible for providing emergency medical services as they
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written notice to the University. All insurance required herein shall contain a waiver of subrogation in favor of the University. All insurance required herein,



	Appendix A.			
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FINANCIAL AID

### Appendix B.

### High School Visiting Student Registration Form



Applicant Information

Hepbum Hall, Room—214 Email: Registran@njcu.edu Website: <u>www.njcu.edu/registrar</u> Phone: 201/200-3334 Fax: 201/200-2062

### NEW JERSEY CITY UNIVERSITY HIGH SCHOOL VISITING STUDENT REGISTRATION FORM

\_\_\_\_Social Security Number: \_\_\_

Ethnic Codes

T.	Date of Birth: Permanent Home Address: City/State:	Gender: M F E	County Code:	I-American Indian or Alaska Native 2- Asian 3-Black or African American	
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