



MID-PLAINS COMMUNITY COLLEGE STUDENT AGREEMENT FORM

Please read the following information carefully

By signing and initialing the following lines you agree that you have read and understand the information and forms in this packet. Failure to follow all of the guidelines in this packet will result in sanctions up to and including termination of said privilege and/or other privileges provided by Mid-Plains Community College.

INITIAL EACH LINE BELOW

- _____ Residence Hall Internet Use Agreement
- _____ Intramurals Participation Waiver & Release of Liability Form
- _____ Missing Student Information
- _____ Residence Hall Inventory Form
- _____ I have received a copy of the Student Housing Handbook and Code of Conduct (flash drive)
- _____ I **have** received the Meningitis Vaccine _____ I have **not** received the Meningitis Vaccine

Missing Student Information

| | |
|--|--|
| <p align="center">Residents 18 Years and Younger</p> <p>You are required to provide custodial parent or guardian emergency contact information below.</p> | <p align="center">Residents 19 Years and Older:</p> <p><input type="checkbox"/> I choose to provide emergency contact information</p> <p><input type="checkbox"/> I decline the option to provide emergency contact information</p> <hr/> <p align="center">Student Signature</p> |
|--|--|

Name _____

Name _____

Relationship _____

Relationship _____

Address _____

Address _____

Contact Number _____

Contact Number _____

Secondary Number _____

Secondary Number _____

I, _____ have read and understand the policies and procedures
(Print Name Legibly)

listed above and agree to the terms as written. Further, I understand that I will be held accountable to these terms in accordance with MPCC policies and procedures.

Signature

Date

Parent/Guardian Signature (if student is under age 19)

Date