

## ACCEPTANCE FORM ONLINE SESSION

## **PARENTAL CONSENT**

I, the undersigned: Mr. Ms.	
First name: Last name:	
Date of birth (DD/MM/YYYY): / Country of birth:	
Address:	
City: Postal code:	
Country:	
Acting in my capacity as parent, legal guardian or other authorized person with cover the student, hereby certify that:	ustody rights, or parental authority
PROGRAMME ATTENDANCE: I authorize	
(student's full name) to r	egister as a student of the Sciences Po
Pre-College Programme – online session from June 16 <sup>th</sup> to June 26 <sup>th</sup> 2025	for the Artificial Intelligence
Bootcamp or from June 30 <sup>th</sup> to July 9 <sup>th</sup> 2025 for the Climate Change Boot	camp. (depending on the selected
programme).	
<ul> <li>REGISTRATION PROCESS: I acknowledge that I have read and that I agree registration process, regarding the reservation of a spot in the programme registration.</li> </ul>	
<ul> <li>PROGRAMME REGULATIONS: I acknowledge that I have read the according academic rules and general behaviour in an online them with the student when necessary, and I agree that the student showith these standards.</li> </ul>	learning environment. I have discussed
	Parent/Guardian's Signature
Parent/Guardian's full name:	
Place and date:	
STUDENT CONSENT	
<ul> <li>PROGRAMME REGULATIONS: I have read, understood and I agree regulations for the programme, regarding academic rules and gene environment.</li> </ul>	•
Student's full name:	Student's Signature





Place and date: .....