



Office of Undergraduate Admissions  
 Clayton State University  
 Morrow, Georgia  
 Phone: (678) 466-4115  
 csuinfo@clayton.edu

## LAKER TRAILBLAZER PROGRAM

### Participation Agreement and Release of Information

I, \_\_\_\_\_, understand that I have not been offered admission at this time to Clayton State University; however, I understand that the Laker Trailblazer Program offers me the opportunity to become a fully admitted Clayton State University (CSU) student after successful completion of the following at **Atlanta Metropolitan State College**:

1. Any required Learning Support courses
2. PLUS 30 transferable college level credit hours, including ENGL 1101 and MATH 1100 or higher; and
3. Maintaining a 2.0 cumulative transfer GPA.

I wish to begin at Atlanta Metropolitan State College for the following semester (please circle one):

FALL 20\_\_\_\_\_

***Agreement DEADLINE: Fall – August 1, 2023***

I further understand that:

- By signing and dating below, I release my Clayton State University Admissions file (this does **NOT** include Financial Aid) to Atlanta Metropolitan State College, give CSU permission to request my transcripts from Atlanta Metropolitan State College upon transferring back to CSU.
- Atlanta Metropolitan State College will determine my admissions decision, as it pertains to their institution, and notify me of my status or if Lawful Presence or immunizations are required.
- I understand that I do not need to submit an additional application fee to Atlanta Metropolitan State College.
- *I understand that I need to add Atlanta Metropolitan State’s School Code (Code: **012165**) to my FAFSA at fafsa.ed.gov. in order use financial aid.*
- **My agreement is considered null & void, if\*:**
  - I do not enroll at the selected school for 3 consecutive Fall or Spring Semester at any point
  - I enroll at a school not affiliated with the Laker Trailblazer program.

\*If agreement is void per these two aforementioned conditions, students are still eligible to transfer, but not awarded the Laker Trailblazer program benefits.

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Date of Birth XX/XX/XXXX)

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Today’s Date XX/XX/XXXX)