

High School Student Admissions Application

Student: Complete Sections I, II, and III then return with your parent’s signature to your high school guidance counselor.

School Counselor/Principal: Complete Section IV.

I. Name _____
Last First Middle Date of Birth

Address _____
Street City Zip Code

Parent/Guardian Phone _____ **Student Cell Phone** _____

Parent/Guardian Email _____ **Student Email** _____

Present High School _____ **Present Grade** _____

II. I hereby submit an application to be considered for enrollment in the following career and technical education program: Please place (1) next to first choice, (2) next to second choice.

<input type="checkbox"/> Aspiring Educator	<input type="checkbox"/> Cosmetology	<input type="checkbox"/> Health Occupations
<input type="checkbox"/> Automotive Technology	<input type="checkbox"/> Culinary Arts	<input type="checkbox"/> Heating, Ventilation, Air Conditioning, Refrigeration
<input type="checkbox"/> Aviation Maintenance Technology	<input type="checkbox"/> Dental Assisting	<input type="checkbox"/> Machine Technology
<input type="checkbox"/> Carpentry	<input type="checkbox"/> Drafting, Design & Engineering	<input type="checkbox"/> Masonry
<input type="checkbox"/> Collision Repair & Refinishing	<input type="checkbox"/> Electrical Occupations	<input type="checkbox"/> Service Occupations
<input type="checkbox"/> Computer Networking	<input type="checkbox"/> Forestry Technology	<input type="checkbox"/> Welding Technology
<input type="checkbox"/> Construction Trades		

III. I understand that every effort will be made to consider me for my first choice and that I will be counseled further if this is not possible. I will, at all times, give my best effort so that I might profit from this educational experience.

Student:

I further understand that, upon successfully completing my major course selection, I will be eligible to receive a Certificate of Achievement from SCTC. Credits earned while at SCTC will apply toward my graduation requirements for my high school diploma awarded by my local school district.

Parent:

I have reviewed the brochure material with my child and I am anxious to have him/her take advantage of the career and technical education curriculum. I hereby give permission for a transcript of school records to be forwarded to the Somerset County Technology Center, including attendance, discipline, testing information, and special education information (if applicable).

Student Signature Date Parent or Guardian Signature Date

IV. This section is to be completed by the sending school’s Guidance Counselor on behalf of the student/applicant:

- Transcript (8th & 9th Grade) Discipline Record Standardized Testing Records (8th Grade)
 Attendance Records (8th & 9th Grade) Special Education/IEP (if applicable) PA Secure ID #

High School Principal Date High School Guidance Counselor Date

It is the policy of the Somerset County Technology Center and the eight participating districts – Berlin-Brothersvalley, Meyersdale Area, North Star, Rockwood Area, Shade-Central City, Shanksville-Stonycreek, Somerset Area and Turkeyfoot-Valley Area – not to discriminate on the basis of sex, age, disability, race, color, sexual orientation and national origin in its education and vocational programs, activities, or employment as required by Title IX, Section 504 and Title VI, and further services, activities, and facilities are accessible to and useable by persons with disabilities. Lack of English language skills will not be a barrier to admission and participation in career and technical education.

For information about your rights or grievance procedures, contact the Title IX Coordinator/Section 504 Coordinator, Administrative Director at 281 Technology Drive, Somerset, PA 15501. Phone: 814-443-3651. EOI-EOE