

First Name _____ Middle Name _____ Last Name _____

Street Address _____ Apt # _____ Email _____

City _____ State _____ Zip _____ Date of Birth _____

Home Phone _____ Cell Phone _____

Parent Name _____ Parent Phone _____

Program Information

Program Applying For _____

Automotive Technology AM/PM
 Residential Construction Technology AM/PM
 Auto Body/Collision Repair Technology AM/PM
 Machine Technology AM or customized schedule
 Welding Technology AM/PM
 Medical Science (CNA, CMA, HHA, RA, Med. Term.) AM only
 EMT-AM/PM/Evenings available-classes at HCC
 CISCO Networking -TBD
 Engineering - Project Lead The Way - By appt. only

Time Request (check one)

AM

PM

AM - 7:50 a.m. - 10:50 a.m.
 PM - 12:50 p.m. - 3:50 p.m.

Current School _____

Grade Next School Year _____

Social Security Number _____

(optional)

Current GPA _____

Number of days absent this school year _____

I HEREBY AFFIRM THAT ALL STATEMENTS MADE HEREIN ARE TRUE AND CORRECT

 Signature of Applicant Date

 Signature of Principal (or Designated Official) Date

Please return completed application to your school counselor for processing.

HCTEA does not discriminate on the basis of race, color, religion, national origin, gender, age, marital or veteran status, or disability.