

Application for Admission - complete form, sign, date and return to your *sending school* guidance counselor.

Technical Program: We will attempt to place each new student in his/her first choice of a technical program; however, due to state requirements, some of our program areas are limited in the number of students allowed into the program. Please indicate a first, second and third choice.

First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_ FLEX: \_\_\_\_\_

Student Information : (please print all information legibly)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_ Grade entering CCTI: \_\_\_\_\_

Gender: \_\_\_\_\_ Race: \_\_\_\_\_ School District: \_\_\_\_\_

Current Program: \_\_\_\_ Regular Ed. \_\_\_\_ Special Ed. Home Phone: \_\_\_\_\_

Phone number for automated calling system if other than the home phone number: \_\_\_\_\_  
List only one phone number

Student lives with: \_\_\_\_ Both Parents \_\_\_\_ Mother \_\_\_\_ Father \_\_\_\_ Foster \_\_\_\_ Custodial Agency

\_\_\_\_ Other - please specify: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address - if different than above: \_\_\_\_\_

Parent/Guardian Information : Relationship:

\_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address - If different than the student's address above:

\_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian Information : Relationship:

\_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address - If different than student's address above:

\_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If not living with parent/guardian : Relationship: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Place of Employment \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If you lived outside of PA, what was your entry date into PA: \_\_\_\_\_

Have you ever been previously enrolled at Carbon Career & Technical Institute? \_\_\_\_\_ If so what Year? \_\_\_\_\_

Parents /Guardians : Read and Sign

For Health and Safety purposes safety shoes and glasses (provided by CCTI) will be required in the industrial program areas of the Carbon Career & Technical Institute. Other programs may require a uniform and the purchase of a tool kit.

All information contained in the CCTI student files is strictly confidential; however, if at any time you wish to review the information about your son/daughter, the guidance counselor will meet with you to do so. Some information we request is personal, but it is vitally important as we care for and assist your son/daughter in realizing their career goals.

I have examined the information on this application and agree to the selections my son/daughter has made. I certify that I am a bona fide resident of the (circle one) Jim Thorpe / Lehighton / Palmerton / Panther Valley / Weatherly School District and that I am the natural parent or legal guardian of the student making application to the Carbon Career & Technical Institute. I understand that my residency in district is necessary for my son/daughter to attend CCTI.

\_\_\_\_\_  
Parent/Guardian Signature

Release of Information :

I authorize \_\_\_\_\_ to release grades, PSSA and Keystone Exam scores for my son/daughter to CCTI.

Name of sending school

\_\_\_\_\_  
Parent/Guardian Signature

It is the policy of the Carbon Career & Technical Institute not to discriminate in its educational programs, activities or employment practices based on race, color, national origin, gender, sexual orientation, disability, age, religion, ancestry, union membership, or any other legally protected classification. Assurance is given that services, activities and facilities are accessible to and usable by disabled persons. As per Federal Funding Guidelines a "Perkins Act Appeals Procedure" has been developed.

For information regarding civil rights and grievance procedures, contact the Principal, Title IX and Section 504 Coordinator at the Carbon Career & Technical Institute, 150 West 13<sup>th</sup> Street, Jim Thorpe, PA, 18229. Telephone: 570-325-3682. Fax: 570-325-3737. Revised 2/24/04

Student Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature : \_\_\_\_\_ Date: \_\_\_\_\_

Sending School Counselor Section

Sending School Counselor Section :

PA 9<sup>th</sup> Grade Entry Date : \_\_\_\_\_ PA Secure ID Number :

Non Resident : \_\_\_\_\_

Check-off List - application packet to include the following:

1. \_\_\_\_ Attendance report
2. \_\_\_\_ Discipline report
3. \_\_\_\_ Report card at time of application
4. \_\_\_\_ Report card or transcript for grade(s) completed prior to current year
5. \_\_\_\_ Grade 8 PSSA Score report
6. \_\_\_\_ Keystone exam(s) score report(s)
7. \_\_\_\_ IEP/ER/504
8. \_\_\_\_ ELL \_\_\_\_ Other placement: \_\_\_\_\_
9. \_\_\_\_ Completed immunization record and health records
10. \_\_\_\_ Parent Registration Statement (transfers only)
11. \_\_\_\_ Act 26 report included (if applicable)
12. \_\_\_\_ Guidance Counselor Review of application completed

\*NOTE: SEND FINAL REPORT CARD FOR CURRENT YEAR AT END OF YEAR.

**High School Counselor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

