ACADEMY OF

CRAFT TRAINING

20 EST. 16

ACT-MOBILE
2022-2023 STUDENT APPLICATION FORM

Name_____ High School_____

Current Grade Level_____ Shirt Size_____

Address_____ Email_____

City_____ State_____ Zip_____ Phone #_____

Best number to reach parent/guardian_____ Alternate Number_____

PROGRAMS OFFERED

NCCER Electrical   **NCCER Building Construction**   **NCCER Welding**

NCCER Pipefitting/Plumbing   **NCCER HVAC/Mechanical**

PLEASE INDICATE IN WHICH PROGRAMS YOU WISH TO ENROLL (Please pick your top 3 choices). THIS IS A COMPETITIVE PROGRAM, PLEASE KNOW THAT IF THERE ARE NO SLOTS AVAILABLE IN THE PROGRAM THAT IS YOUR FIRST CHOICE YOU WILL BE PLACED IN YOUR SECOND OR THIRD CHOICE AS SPACE ALLOWS. IF YOU ONLY WRITE IN ONE PROGRAM AND THAT PROGRAM IS FULL, YOU WILL NOT BE PLACED IN ANOTHER PROGRAM.

Choice 1_____ **Choice 2**_____ **Choice 3**_____

What are your plans after high school?_____

_____

_____

Student Signature_____ **Date**_____

Parent Signature_____ **Date**_____

IF YOUR STUDENT HAS A DRIVER'S LICENSE & YOU GIVE PERMISSION FOR HIM/HER TO DRIVE TO THE REGIONAL CAREER TECHNICAL CENTER, SIGN AGAIN

Parent Signature_____ **Date**_____

**ALL APPLICATIONS ARE DUE NO LATER THAN APRIL 15, 2022*

ACT-MOBILE

EMPLOYMENT/INTERNSHIP AND CAREER OPPORTUNITIES

High performing students may be given the opportunity for holiday/summer internships and after graduation job placement. Are there any limiting factors (medical, etc.) that would preclude you from working in the commercial construction industry?

_____

_____

_____

_____

On a separate sheet of paper tell us about yourself and your reason for wanting to enroll in your choice program

--- *DO NOT WRITE BELOW THIS LINE* ---

FOR SCHOOL USE ONLY

COUNSELOR/CAREER COACHES PLEASE COMMPLETE THE FOLLOWING

504/IEP Yes or No, if yes please list exceptionality or condition_____

Student GPA _____   **Days Absent in current year** _____   **Student Tardies in Current Year**_____

Number of ISS_____   **Number of OSS**_____   **Number of Failed Classes** _____

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