



# Application for Admission - Main Campus 2010/2011

Legal Name \_\_\_\_\_  
Last First Middle Name

Address \_\_\_\_\_  
Mailing Address City State Zip

Phone \_\_\_\_\_ County of Residence \_\_\_\_\_  
Area Code

Social Security Number \_\_\_\_\_ Native Language \_\_\_\_\_

Birthdate \_\_\_\_\_ Birth City \_\_\_\_\_ Home High School \_\_\_\_\_

**Office Use Only**

Date Received \_\_\_\_\_

Status \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sex  M  F Open Enrolled? \_\_\_\_\_ From Where? \_\_\_\_\_

**Ethnic Group:**  White  Black  Hispanic  Asian or Pacific Islander  American Indian or Alaskan Native  Multiracial

**Parent Information:** To be completed by Parent or Guardian

Father or Guardian (Last Name, First Name) \_\_\_\_\_ Mailing Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother or Guardian (Last Name, First Name) \_\_\_\_\_ Mailing Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent or Guardian E-mail Address \_\_\_\_\_ Student E-Mail Address \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

**Career Training Programs:** *Indicate your First Choice with "1", your Second Choice with "2" (\* denotes College Tech Prep Programs)*

<p><b>Human Services</b></p> <p>___ *Health Technology</p> <p>___ Medical Care Services (one-year only)</p> <p>___ Printing and Graphic Arts Technology</p> <p>___ *Culinary Arts</p> <p>___ *Early Childhood Education</p> <p>___ Cosmetology</p> <p>___ Project SEARCH (must defer graduation)</p> <p><b>Agricultural and Environmental Systems</b></p> <p>___ Animal Management Technology</p> <p>___ Professional Turf and Landscaping</p>	<p><b>Construction Trades</b></p> <p>___ Building Maintenance</p> <p>___ Carpentry</p> <p>___ Electricity</p> <p>___ Masonry</p> <p>___ Plumbing and Pipefitting</p> <p><b>Engineering &amp; Science Technologies</b></p> <p>___ *Electronics Engineering Technology</p> <p>___ *Architectural and Mechanical Design</p>	<p><b>Transportation Systems</b></p> <p>___ *Automotive Technology</p> <p>___ *Auto Collision Technology</p> <p>___ Power Equipment Technology</p> <p>___ Diesel Technology</p> <p><b>Business and Administrative Services</b></p> <p>___ *Information Technology</p> <p>___ *Business Administration Technology</p> <p>___ Business and Office Technology</p> <p>___ Medical Office Technology</p> <p>___ Administrative Office Specialist (one-year only)</p>
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I will be attending Ohio Hi-Point on a full-day basis  I will be attending Ohio Hi-Point on a half-day basis

**Academic Information:** To be completed by counselor.  
 Applications will be processed only when accompanied by transcripts.

Current GPA \_\_\_\_\_

Core Credits Earned Grade 9 \_\_\_\_\_ Grade 10 \_\_\_\_\_

Days Missed (U/E) Grade 9 \_\_\_\_\_ Grade 10 \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Counselor \_\_\_\_\_ Date \_\_\_\_\_

*Please make a copy for your records.*

**Admission Agreement**

When classes begin at Ohio Hi-Point Career Center, I agree to attend for a minimum of two school weeks.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

I agree to provide work attire and pay fees as required. I also authorize my student's home school to release transcripts to Ohio Hi-Point Career Center.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

It is the policy of the Ohio Hi-Point Joint Vocational School District that the Board of Education does not discriminate on the basis of race, color, religion, national origin, sex, disability, military status, ancestry, or age in its programs and activities, including employment opportunities.