Application Date:Scho	ool ID #:	PA Secure ID #	Current Grade:		
Applying for School Year:	Sending School:				
Student Name:					
Last Name		First Name	Middle Initial		
Home Address:		Street			
		7: 0 1			
City Home Phone #:	State Date of	Zip Code Birth:Sex:_	Male Female		
nome mone m		ams of Study	ividici cilidic		
Please select up to four (4) prog choice), 2 (second choice), 3 (th	ram choices from the I	ist below. Identify program order o	f preference with a 1 (first		
Construction Cluster		<u>Techn</u>	Technical Cluster		
Bricklaying	Bricklaving		Computerized Drafting Technology		
Building & Property Maintenance		<del></del> ·	Electronics & Communication		
Cabinetmaking & Finish Carpentry		 Technology	Technology		
Carpentry		<u> </u>	Information Technology – Applications		
Electrical Technology			Information Technology – Web Design		
Painting & Decorating		<del></del>	-		
Plumbing & Heating		<u>Manufac</u>	Manufacturing Cluster		
<b>Graphic Communication Cluster</b>		Automation & Engin	Automation & Engineering Technology		
			Machine Shop Technology		
Advertising Design & Comr		Welding & Metal Fal	Welding & Metal Fabrication		
Printing & Graphic Commu	nications				
		<u>Transpo</u>	rtation Cluster		
Personal Service	es Cluster				
		Auto Body Repair			
Baking & Pastry Arts			Automotive Technology		
Cosmetology			Diesel Truck Technology		
Culinary Arts		<del></del>	Motorcycle, Marine & Small Engine		
Early Childhood Education		Technology			
Horticulture		Haalkh Calanaa	To should an Chuston		
Public Safety & Security Sewing & Clothing Manufacturing		<u>Health Science</u>	e Technology Cluster		
Service Occupations *	icturing	Hoalth Modical Offic			
Service Occupations *			Health Medical Office		
* Counselor Recommendation Required			Health Medical ProfessionsHealth Nursing Careers		
Counselor Recommendation 1	equireu	nearth warsing cares			
Student's Statement of I		ABOUT your career goals and WHY	you are interested in your firs		
choice. (continue your remarks or	n separate paper if more	space is needed)			

Parent's/Guardian Signature

Student's Signature

## **Family Information**

Mother/Guardian:			Lives with ? yes	no	
Address:					
City:	State:	z	ip Code:		
*E-mail Address:					
Phone-Home:	Cell:	Work:		Ext:	
Father/Guardian:			Lives with ? yes_	no	
Address:					
City:	State:	z	Zip Code:		
*E-mail Address:					
Phone-Home:	Cell:	Work:		Ext:	
Alternate Person for	Emergency Contac	<u>t:</u>			
Name:		Relationship:			
Home Phone:		Cell Phone:			
Work Phone:	Ext:	E-mail Address:			
	<u>Pa</u>	rental Consent			
course may involve operations school to teach the safe use taken to avoid accident or in	echnical education progon of power machinery of all tools and equipm njury to the students or roviding career & techn	gram under the authority of the and/or working with electricate in the instruction others within that instruction ical education and do hereby st of my knowledge.	he Reading Muhlenberg Il components. It is the nal program, reasonabl nal area. By signing belo	policy of this e precautions are ow, I understand	
Parent's/Gua	ardian Name	Signature	 Date		

## **Home School Counselor Recommendations & Comments:**

Note: The Home School Counselor should complete this section only after the information in Section 1 and 2 are complete. RMCTC will **not** accept applications with incomplete information. Name of Counselor: Rate: (0=poor, 5=excellent)\_\_\_\_\_Discipline: \_\_\_\_\_\_Attendance:\_\_ (# & type of infractions to date) (# of absences & tardies to date) Proposed Social Studies Course: Please attach the following: (and check the item) Student summary from e-schools, inc discipline & attendance \_\_\_\_\_ Student transcript courses summary from e-schools \_\_\_\_ Standardized Please answer the following and attach if applicable: Yes No \_\_\_\_\_ Student's most current IEP **IEP** \_\_\_\_\_ Evaluation Report (ER, RR, etc.) ER, RR, etc. Assessment \_\_\_\_\_ Student assessment(s) for career technology placement Please check one: Resident Status (must indicate one) Non-Residential Status (must indicate one) \_\_\_\_\_ 1305 (Foster Home)\* \_\_ Regular \_\_\_\_\_ 1306 (Children's Home)\*\* 1302 (Temporary Custody) \_\_\_\_ Tuition

If required information is not submitted to RMCTC student online registration will be put on waitlist status until received

RMCTC Counselor Signature

Home School Counselor Signature

It is the policy of Reading Muhlenberg Career & Technology Center not to discriminate on the basis of sex, handicap, race, color and national origin in its educational programs, activities or employment as required by Title IX, Section 504 and Title VI.

<sup>\*</sup>Copy of Placement agency letter required

<sup>\*\*</sup>PDE-4605 form and copy of court order required