



Name: _____

COMPLETE APPLICATION & RETURN TO YOUR SCHOOL GUIDANCE OFFICE

Application Date: _____ Student ID #: _____ PA Secure ID # _____ Current Grade: _____

Applying for School Year: _____ Sending School: _____

Student Name: _____
Last Name First Name Middle Initial

Home Address: _____
Street

City State Zip Code Home Phone #

Date of Birth: _____ Sex: Male Female

Ethnicity:

Multiracial – Check one: Yes No

Indicate primary race with the number one (1) and secondary race with the number two (2).

_____ American Indian/Alaskan Native _____ Asian _____ Black (Non-Hispanic)
_____ White (Non-Hispanic) _____ Hispanic _____ Native Hawaiian or Other Pacific Islander

Contact Information

Mother/Guardian: _____ Lives with her? yes ___ no ___

Address: _____

City: _____ State: _____ Zip Code: _____

*E-mail Address: _____

Phone-Home: _____ Cell: _____ Work: _____ Ext: _____

Father/Guardian: _____ Lives with him? yes ___ no ___

Address: _____

City: _____ State: _____ Zip Code: _____

*E-mail Address: _____

Phone-Home: _____ Cell: _____ Work: _____ Ext: _____

Alternate Person for Emergency Contact

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Ext: _____ E-mail Address: _____

Programs of Study

Please select up to three (3) program choices from the list below. Identify program order of preference with a 1 (first choice), 2 (second choice), and 3 (third choice).

If not accepted into one of your choices below, would you consider another program? yes _____ no _____



Construction Cluster

- ___ Bricklaying
- ___ Building & Property Maintenance
- ___ Carpentry
- ___ Electrical Technology
- ___ Painting & Decorating
- ___ Plumbing & Heating



Graphic Design & IT Systems Cluster

- ___ Advertising Design & Commercial Art
- ___ Computerized Drafting Technology
- ___ Information Technology – Applications
- ___ Information Technology – Web Design
- ___ Printing & Graphic Communications



Transportation Cluster

- ___ Auto Body Repair
- ___ Automotive Technology
- ___ Diesel Truck Technology
- ___ Motorcycle, Marine & Small Engine Technology



Manufacturing Cluster

- ___ Engineering & Automation Technology
- ___ Machine Shop Technology
- ___ Welding & Metal Fabrication



Health Sciences Cluster

- ___ Health Dental Occupations
- ___ Health Medical Office
- ___ Health Medical Professions
- ___ Health Nursing Careers



Personal Services Cluster

- ___ Baking & Pastry Arts
- ___ Cosmetology
- ___ Culinary Arts
- ___ Early Childhood Education
- ___ Horticulture
- ___ Public Safety & Security
- ___ Sewing & Clothing Manufacturing
- ___ Service Occupations *

* Special Requirements Apply

Student's Statement of Interest

Tell us ABOUT your career goals and WHY you are interested in your first choice. (continue your remarks on separate paper if more space is needed)

Student's Signature: _____

Parental Consent

This is to certify that _____ has my permission to participate in an approved career and technical education program under the authority of the Reading Muhlenberg CTC. This course may involve operation of power machinery and/or working with electrical components. It is the policy of this school to teach the safe use of all tools and equipment involved in the instructional program, reasonable precautions are taken to avoid accident or injury to the students or others within that instructional area. By signing below, I understand there are risks involved in providing career & technical education and do hereby attest that the information contained in this enrollment is complete and accurate to the best of my knowledge.

Parent's/Guardian 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: _____

Comments _____

Please Attach the Following
(check the item)

- _____ Student summary from e-schools, including discipline & attendance
- _____ Student transcript courses summary from e-schools
- _____ Standardized Testing

Please Answer the Following and Attach if Applicable:

	Yes	No	
IEP	_____	_____	Student's most current IEP
ER, RR, etc.	_____	_____	Evaluation Report (ER, RR, etc.)
Assessment	_____	_____	Student assessment(s) for career technology placement

Please check one:

Resident Status (must indicate one)

- _____ Regular
- _____ 1302 (Temporary Custody)

Non-Residential Status (must indicate one)

- _____ 1305 (Foster Home)*
- _____ 1306 (Children's Home) **
- _____ Tuition

Home School Counselor Signature

RMCTC Counselor Signature

Student online registration will be put on **hold** until all required information is received.

***Copy of Placement agency letter required**

****PDE-4605 form and copy of court order required**

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.