



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

Applying for School Year: _____ Sending School: _____ Adult T-Shirt Size: _____

Student Name: _____
Last Name First Name Middle Initial

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), 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

- ____ 3D Manufacturing Technology
- ____ Engineering & Automation Technology
- ____ Welding & Metal Fabrication



Health Sciences Cluster

- ____ Health Dental Occupations
- ____ Health Medical Careers
- ____ Health Medical Professions
- ____ Health Nursing Careers
- ____ Health Sports Medicine & Rehabilitation



Personal Services Cluster

- ____ Baking & Pastry Arts
- ____ Cosmetology
- ____ Culinary Arts
- ____ Early Childhood Education
- ____ Horticulture
- ____ Public Safety & Security
- ____ Sewing & Clothing Manufacturing

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Parent's/Guardian 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.

1. Save this PDF document. Please name the saved file using your Student ID number. For example, a Reading student may call the file **207811**.
2. Email the saved document to the appropriate school counselor:
 - a. Reading students - send to: **rosel@readingsd.org**
 - b. Muhlenberg students - send to: **mclaughlinj@mail.muhlsdk12.org**

This portion will be completed by the home school counselor.

Home School Counselor Recommendations & Comments: _____

Recommended Social Studies: _____

Discipline: _____
(# & type of infractions to date)

Attendance: _____
(# of absences & tardies to date)

Completed / Attached:

- | | | |
|--|--|---|
| <input type="checkbox"/> Registered Online | <input type="checkbox"/> IEP (if applicable) | <input type="checkbox"/> Transcript |
| <input type="checkbox"/> Vocational Assessment | <input type="checkbox"/> ER, RR, etc. | <input type="checkbox"/> E-School summary, inc. discipline & attendance |

Home School Counselor Signature

By typing your name, you are signing this application electronically. You agree your electronic signature is the legal equivalent of your manual signature on this application.

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

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