

**Partner School Use Only**
 PA Secure ID # \_\_\_\_\_  
 Grd Level upon PWCTC \_\_\_\_\_  
 Enrollment \_\_\_\_\_
**Parkway West CTC**
 7101 Steubenville Pike  
 Oakdale, PA 15071-9111  
 412-923-1772, Fax 412-787-7257

Student # \_\_\_\_\_

**Parkway Office Use Only**
 AM  PM  A  S  
 Program \_\_\_\_\_  
 Interview YES  NO 

# Application for Student Admission

(PLEASE PRESS HARD AND PRINT LEGIBLY)

Date / / Career Objective \_\_\_\_\_

Student Name LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

Date of Birth / / Gender M / F Home Phone ( ) - \_\_\_\_\_

Partner School District \_\_\_\_\_ Attending School \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Father's Day Phone ( ) - \_\_\_\_\_ Mother's Day Phone ( ) - \_\_\_\_\_

Father's Employer \_\_\_\_\_ Mother's Employer \_\_\_\_\_

Father's Cell Phone ( ) - \_\_\_\_\_ Mother's Cell Phone ( ) - \_\_\_\_\_

Father's Email \_\_\_\_\_ Mother's Email \_\_\_\_\_

Does the student reside with both parents? YES  NO  If no, with which parent does he/she reside? Father / Mother

Legal Guardian, if not parent \_\_\_\_\_ Guardian Day Phone ( ) - \_\_\_\_\_

**IN CASE OF EMERGENCY CALL**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

*The above data will be used for permanent record information only upon the student's acceptance.***CAREER MAJORS***(Indicate with a (1) for your first choice and a (2) for your second choice.)*

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> CONSTRUCTION TECHNOLOGY<br><i>Includes: Carpentry, Electrical Construction and Maintenance, HVAC/R, and Masonry</i>                                       | <input type="checkbox"/> AUTO BODY REPAIR      | <input type="checkbox"/> DRAFTING and DESIGN      |
| <input type="checkbox"/> INFORMATION TECHNOLOGY<br><i>Includes: Business Technology, Computer Technology, Digital Multimedia Technology, and Information Technology Essentials</i> | <input type="checkbox"/> COSMETOLOGY           | <input type="checkbox"/> PUBLIC SAFETY TECHNOLOGY |
|  | <input type="checkbox"/> AUTOMOTIVE TECHNOLOGY | <input type="checkbox"/> HEALTH ASSISTANT         |
|  | <input type="checkbox"/> CULINARY ARTS         | <input type="checkbox"/> WELDING TECHNOLOGY       |

*Permission is granted for my son/daughter to apply to Parkway West Career Technology Center.**Authorization is granted for the release of his/her school transcript and any other pertinent educational information.*

Student Signature \_\_\_\_\_ Date / /

Partner School Counselor \_\_\_\_\_ Date / /

Parent / Guardian Signature \_\_\_\_\_ Date / /

**PUBLIC NOTICE OF NON-DISCRIMINATION**

It is the policy of Parkway West CTC not to discriminate on the basis of race, sex, religion, color, national origin, handicap or limited English proficiency in its Educational Programs, Activities or Employment Policy as required by Title IX of 1972 Educational Amendments, Title VI of the Civil Rights Act of 1964, Section 504 Regulations of the Rehabilitation Act of 1973, and the American Disabilities Act. For information regarding services, activities, programs, and facilities that are accessible to and usable by handicapped persons, or for inquires regarding compliance with the above nondiscriminatory policies, contact the **Director, Parkway West CTC, 7101 Steubenville Pike, Oakdale, Pennsylvania, 15071**; telephone 412-923-1772 or to the Director of the Office of Civil Rights, Department of Health, Education, and Welfare, Washington, D.C.