

Date of Application: _____

Date Application Received: _____

*Buckeye Hills Career Center
Gallia-Jackson-Vinton Joint Vocational School District
P. O. Box 157, Rio Grande, Ohio 45674 – www.buckeyehillscareercenter.com*

APPLICATION FOR ADMISSION

This application **must** be returned to your high school Counselor! All items must be completed. To be accepted, applicants must have six (6) high school credits with four being in the core curriculum, be at least 16 years of age during the first full week of October, and be in at least their third year of high school.

PLEASE PRINT. **Applications are processed on a first come, first served basis. Eligible students will be placed starting April 4, 2007.**

Name: _____ Home High School _____
(Last Name) (First Name) (Middle Name)

Student Address: _____
Number Street Name City Zip

Student Phone Number: _____ Student Social Security #: _____

Date of Birth: _____ Age: _____ Present Grade: _____ Male: _____ Female: _____

Father's Name: _____ Mother's Name: _____

Mailing Address: _____ Mailing Address: _____

Father's Place of Employment/Phone: _____ Mother's Place of Employment/Phone: _____

LEGAL GUARDIAN: _____ Phone: _____

Mailing Address: _____
Number Street Name City Zip

CAREER OPPORTUNITIES THROUGH CAREER-TECHNICAL EDUCATION

Career-Technical Programs: Please indicate your first choice by placing a (1) in the corresponding blank; your second choice by placing a (2) in the corresponding blank.

ALLIED HEALTH ACADEMY

- _____ Diversified Health Occupations
- _____ Diversified Cooperative Health Occupations
- _____ Intro to Health Information Technology/Tech Prep
- _____ Patient Care Technician/Tech Prep

HUMAN RESOURCE ACADEMY

- _____ Child Care
- _____ Cosmetology
- _____ Culinary Prep
- _____ Food Preparation
- _____ Public Safety: Private Security
- _____ Firefighter 1 & 2
- _____ EMT – B

BUSINESS AND MARKETING ACADEMY

- _____ Administrative Office Assistant
- _____ Business/Computer Technology/IT Tech Prep
- _____ Electronic Communication Systems/IT Tech Prep
- _____ Retail & Marketing

MANUFACTURING ACADEMY

- _____ Precision Machining Technologies
- _____ Welding Manufacturing

CONSTRUCTION TRADES ACADEMY

- _____ Computer Aided Drafting
- _____ Architectural
- _____ Manufacturing/CNC
- _____ Building Trades
- _____ Building & Grounds Maintenance
- _____ HVAC/Plumbing/Electrical

TRANSPORTATION ACADEMY

- _____ Agricultural and Diesel Mechanics
- _____ Auto Collision Technology
- _____ Auto Service Technology/Tech Prep

Reasons for my first career/technical program choice are: _____

Interests and Hobbies are: _____

Favorite Subjects are: _____

SPECIAL HEALTH CONCERNS: a) _____ None, b) _____ Allergies, c) _____ Asthma, d) _____ Color Blind, e) _____ Special Physical Considerations. (Handicapping conditions will not prohibit placement into an appropriate career/technical program.) If any items other than (a) are checked above, please provide more information: _____

Previous Part-Time Jobs: (paid or unpaid) _____

PARENT STATEMENT: I am interested in my son/daughter attending the Career Center because: _____

Please identify any factors that should be given special consideration in evaluating this student's application: _____

PLEASE NOTE: Students accepted into a career/technical program will be required to attend classes at the Career Center for two weeks. Any student wishing to return to their home high school MUST have the paper work completed the last day of the first two weeks of school.

Student Signature: _____ Date: _____

Parent/LEGAL Guardian Signature: _____ Date: _____

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INFORMATION TO BE COMPLETED BY THE HOME HIGH SCHOOL COUNSELOR

OGT Test results: (P or F) Reading _____ Mathematics _____ Writing _____ Science _____ Social Studies _____

Number of credits completed prior to this school year: _____ Number of credits anticipated for the current school year: _____

Verification of birth (per official school record) Month _____ Day _____ Year _____

Please identify any factor that should be given special consideration in evaluating this student's application _____

Signature of Home School Counselor: _____ Date: _____

ATTACH OFFICIAL TRANSCRIPT

It is the policy of the Gallia-Jackson-Vinton Joint Vocational School District that educational programs and other activities be conducted in adherence to Title VI of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973 in assuring non-discrimination with regard to race, color, national origin, sex and disability. A complaint may be filed with the U.S. Dept. of Education at any time, and that it is not necessary for a person to go through the district's grievance procedures before filing with the U.S. Dept. of Education. Complaints may be sent to U.S. Dept of Education, Team Leader, Office of Civil Rights, 600 Superior Ave. E, Suite 750 Bank One Center, Cleveland, Ohio 44104.