## **Muncie Area Career Center (MACC)**

2500 N. Elgin St.

**Muncie, IN 47303** 

OFFICE: (765)747-5257

FAX: (765)751-0500

## APPLICATION FOR CAREER CENTER PROGRAMS FOR ~ 2020-2021

**Instructions:** Complete all information requested on this form (**front and back**) accurately and completely, sign it, have your parents/guardian sign it, and return it to your home school counselor. Please print information requested.

| COMPLETED BY APPLICANT                                     | CANT Home School |                            |                       |                    | _ |
|--|------------------|----------------------------|-----------------------|--------------------|---|
| Student's Name   |                  |                            |                       |                    |   |
|  | (last)           |                            | (first)               | (middle)           |   |
| Address  |                  |                            |                       |                    |   |
| (street or R.F.D.)<br>Name of Parent/Guardian with whom yo | u reside         | (city)                     |                       | (zip code)         |   |
| Student Cell Phone   | F                | Parent Cell Phone          |                       |                    |   |
| Social Security Number                                     |                  | School Year Grade          | for <u>2020-2021:</u> | (Circle One) 11 12 |   |
| Birth Date   | Age              | Race                       | Male                  | _ Female           |   |
| Indicate Session Preference AM P                           | ,                | ACC last year? Yes (Circle |                       |                    |   |

**Instructions:** In the Program Selection column below, place the number "1" for your first choice next to the program you wish to enroll in during the 2020-2021 school year. If this program is unavailable and you would accept a second choice, place the number "2" in the spaces provided. Please also indicate with a check mark if you are a returning, second-year student in the program selected.

| Indicate<br>Program Selection<br>"1" or "2" | Program Area  | Program Information Class Times: AM Session: 7:55 AM – 10:30 AM PM Session: 12:25 PM – 3:00 PM  | Returning<br>Second-year<br>student |
|---|---|---|-------------------------------------|
|   | Automotive Service Technology   | 1 or 2 Year Program – AM or PM  |                                     |
|   | Biomedical Sciences1st Yr PBS & HBS (AM Only)2nd Yr MI & BI (PM Only) | 2 Year Program  Only Juniors will be admitted as first-year students unless senior enrollment is approved by CTE Director                         |                                     |
|   | Construction Technology   | 2 <sup>nd</sup> Yr Prerequisite: PBS & HBS<br>1 or 2 Year Program – AM or PM  |                                     |
|   | Cosmetology   | 2 Year Program - PM Only Only Juniors will be admitted as first-year students Class times: M-W-F 12:00 Noon – 4:00 PM T & Th 12:00 Noon – 6:00 PM |                                     |
|   | Criminal Justice  | 1 or 2 Year Program for Juniors or Seniors – AM Only  |                                     |
|   | Dental Careers  | 1 Year Program for Juniors or Seniors – AM or PM  |                                     |
|   | Early Childhood Education   | 1 or 2 Year Program – AM or PM  |                                     |
|   | Electrical Technology   | 1 or 2 Year Program – AM or PM  |                                     |
|   | Fire & Rescue   | 1 or 2 Year Program for Juniors or Seniors – PM Only  |                                     |
|   | Health Sciences I (CNA)   | 1 Year Program for Juniors or Seniors – AM or PM  |                                     |
|   | Health Sciences II  | 1 Year Program – Seniors / PM Session 12:25 – 3:00 PM Prerequisite: Dental Careers or Health Sciences I   | X                                   |
|   | Interactive Media Technology  | 1 or 2 Year Program – AM or PM  |                                     |
|   | Welding Technology  | 1 or 2 Year Program – AM or PM  |                                     |
|   |   | pw will be held at Muncie Central High School.  |                                     |
|   | Automation Technology Careers   | 1 or 2 Year Program – AM Only – 1-hour class  |                                     |
|   | Purdue Engineering Technology   | 1 or 2 Year Program – <b>AM Only – 1-hour class</b>   |                                     |

## THIS PART TO BE READ AND SIGNED BY PARENT OR GUARDIAN:

- 1. Effective education requires that students use various types of equipment. The school makes every effort to protect the students and to instruct them specifically in correct and safe methods of operation. Parents should know that according to legal precedent, in general, the school or its instructors are not liable for accidents or injuries except in cases of specific negligence.
- 2. Area Career Center students are required to participate in job shadowing activities, field trips, and, in some programs, internship experiences in various businesses or industrial locations away from the school building. Transportation to job shadowing activities or internship experiences is the responsibility of the student and/or parent/guardian.
- 3. The parent and student acknowledge that the applicant has no medical or health condition that prevents the student from participating in activities at the Muncie Area Career Center. If a medical condition exists, it is the parent's responsibility to notify the school by attaching appropriate documentation.
- 4. Permission is granted to release grade and attendance records to Muncie Area Career Center.

| hereby approve the application of  |                      |                               |                    | fo                      | or entrance in the |
|--|----------------------|-------------------------------|--------------------|-------------------------|--------------------|
| Muncie Area Career Center.   |                      | (Print Student Name)          |                    | ·`                      |                    |
| Date   | Signed               |                               |                    |                         |                    |
|  | -                    | (Student)                     |                    | (Parent                 | /Guardian)         |
| Parent's E-mail Address:   |                      |                               |                    |                         |                    |
| Please note that this application for e<br>for the fall semester. A change in sc<br>approval from the MACC Administrat | hedule will require  | an interview with the st      |                    |                         |                    |
| Return Form to Guidance Cou  | nselor               |                               |                    |                         |                    |
| This section is to be completed  | d by <u>Counselo</u> | r ONLY                        |                    |                         |                    |
| STEP/ ECA Results  |                      | Indiana Student T             | Test Number:       |                         |                    |
| STEP Grade 10 English Score:   | /Passed Y or         | N                             |                    |                         |                    |
| STEP Grade 10 Math Score:  | /Passed Y or         | N                             |                    |                         |                    |
| Exempt from ISTEP Testing:I  | Non-Diploma Trad     | ck Student <u>OR</u> <b>N</b> | EW Graduation P    | athways Di <sub>l</sub> | oloma              |
| Number of days ABSENT for previo   | ous semester         | Cumulativ                     | e grade point aver | age                     |                    |
| Does student have I.E.P.? Yes  | No                   | Student has a 5               | 04 Plan? Yes       | No                      | _                  |
| Indicate Diploma Track:  Core 40  Core 40 with Tech  Core 40 with Acad General Diploma Certificate of Com              | lemic Honors         |                               |                    |                         |                    |
| Signed   |                      | Da <sup>-</sup>               | te                 |                         | (School Counselor) |
|  |                      |                               |                    |                         |                    |

## **Muncie Area Career Center Application**

Name: \_\_\_

| inis form is due                      | e to the Burris Counselin | ng Center by Wednesday, March 11, 2019      |
|---------------------------------------|---------------------------|---|
| gram are you interes                  | ted in pursuing at the N  | Muncie Area Career Center?                  |
| Automation and Rob                    | otics                     |   |
| Auto Service Technol                  | ogy                       |   |
| Biomedical                            |                           |   |
| Construction Techno                   | ogy                       |   |
| Cosmetology                           |                           |   |
| Den <mark>tal</mark> Careers          |                           |   |
| <mark>Early C</mark> hild Education   |                           |   |
| <mark>Electrica</mark> l Technology   |                           |   |
| <mark>Public Safet</mark> y Fire Scie | ence                      |   |
| Health Careers                        |                           |   |
| Information Technolo                  |                           |   |
| Public Safety Law Enf                 | orcement                  |   |
| Welding Technology                    |                           |   |
|                                       | Next year y               | you will be a:                              |
|                                       | Junior                    | □ Senior                                    |
|                                       | - Julion                  | A Decinion                                  |
|                                       | Would you prefer          | classes at the MACC:                        |
| ☐ In the mor                          | ning (7:55-10:35am)       | ☐ In the afternoon (12:30-3:00pm)           |
|                                       | Are you looking to        | take MACC classes:                          |
|                                       | ☐ One year                | ☐ Two years                                 |
|                                       |                           |   |
| Plea                                  | se attach vour response   | es to the following questions:              |
|                                       |                           | ng the MACC is important to you.            |
|                                       |                           | pen that you do not have available at Bur   |
| 3. How                                | would studying a progr    | ram at the MACC impact your future?         |
|                                       |                           |   |
| Student Signa                         | ture                      | Parent Signature                            |
| Student Signa                         | ture                      | r arent Signature                           |
| ACC classes are year-                 | long courses, and stude   | nts will earn 3 credits each semester. In m |
| , to earn a field-reco                | gnized certification you  | need to successfully complete two years in  |
|                                       |                           |   |
| sturn this farms and -                | dditional paca(a) ta tha  | Burris Counseling Center. The Burris advise |

Office Use Only:

Number of Absences/Tardies this year: \_\_\_\_\_

Credits: \_\_\_\_\_

Student's GPA: \_\_\_\_\_