

**STUDENT APPLICATION FOR ENROLLMENT
IN THE CAREER PATHWAY EXPERIENCE PROGRAM**

Name _____ Date _____

Grade and Age _____

Address _____

Home Phone _____ Date of Birth _____

Cell Phone _____

Do you have your own transportation? _____ Access to a car? _____

Driver's License? _____ Interested in Summer Employment? _____

Name of CTE program completed or currently enrolled in _____

State your clearly defined career objective _____

What courses have you taken relating to your career objective? _____

Father's Name or Legal Guardian _____

Address _____

Mother's Name or Legal Guardian _____

Address _____

Extracurricular Activities in which you participate _____

What do you plan to do after you graduate from high school? _____

Do you plan to attend college? _____ If so, where? _____

If so, what program do you plan to major in at this college? _____

Why are you applying for admission to the CPE program? _____

Previous Work Experiences:

Employed by	Type of Work	Dates Worked

Are there any days or times you cannot work? _____

If yes, please give a reason. _____

Are you currently employed? _____

If yes, where? _____

Please attach a personal data sheet (resume) and a copy of your class schedule. In the references section of your resume, include three teachers who can attest to the quality of your work.

To the student:

CPE provides an opportunity for employment in the businesses and industries in our area. When you participate in this program, you indicate that you are sincerely interested in putting forth your best efforts to receive on-the-job training. You are representing yourself as well as the school/district while at your place of employment. If you accept this responsibility, please sign below.

Date

Student

To the parent or guardian:

Do you consent to your daughter or son entering in CPE, and do you agree to cooperate with the school and the employer in making the training and education of the greatest possible benefit to your daughter or son? If so, please indicate your support and approval with your signature.

Date

Parent or Guardian