



# 2017-2018 School Year Enrollment Request

2205 W. Campus Place Mount Vernon, WA 98273  
(360) 848-0706 FAX: (360) 848-7586 nwtech.k12.wa.us

**PLEASE PRINT**

Complete this form and return to your school counselor for processing.

Legal Last Name  First Name  MI

Current Address

City  Zip  Birthdate        Grade  Grad Year  Gender

Student Phone ( )  Home Phone ( )  Birth City & State: \_\_\_\_\_

Student Email

Student Ethnicity:  American Indian  Asian  Hispanic  Pacific Islander  
 African American  Caucasian  Other: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Why have you chosen to apply to NCTA?	How have you prepared for NCTA to be the next step in your education?
What are your plans after high school?	What are your career goals?

1<sup>st</sup> Parent Name  Relationship: \_\_\_\_\_

Current Address  ZIP

Parent Email

Parent Cell Phone ( )  Home Phone ( )  Work ( )

Primary Language: \_\_\_\_\_

2<sup>nd</sup> Parent Name  Relationship: \_\_\_\_\_

Current Address  ZIP

Parent Email

Parent Cell Phone ( )  Home Phone ( )  Work ( )

Primary Language: \_\_\_\_\_

Emergency Contact  Relationship: \_\_\_\_\_

Cell Phone ( )  Home Phone ( )  Work ( )

I authorize the Northwest Career & Technical Academy to: Have access to any and all of my student's school records; to use my student's records; to obtain my student's photo and/or statements as they relate to the mission of the Academy, and/or to aid in the success and promotion of career & technical education. The signature of students over the age of 18 living independently verifies agreement. I also understand that if my student participates in an off-campus program, location, or clinical, I will be required to provide transportation.

Student Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

**Class Selection:** All classes run Monday through Friday. NCTA generally follows the Mount Vernon School District Calendar for breaks and most half days. Please indicate your 1st and 2nd choice in the box by writing "1st", "2nd", etc. Minimum number of students is required to run each section.

Academy Program	Campus	Session 1 8 – 10:30	Session 2 11:30 – 2	Session 3 3-5:30
Aerospace Manufacturing	Anacortes			
Animal Care & Handling	Mount Vernon			
Applied Medical Science (Nursing Assistant)	Mount Vernon			
Automotive Services	Sedro Woolley			
Construction -- Carpentry	Sedro Woolley			
Construction -- Skilled Trades	Anacortes			
Criminal Justice -- Law Enforcement Emphasis	Mount Vernon			
Criminal Justice -- Legal Services Emphasis	Mount Vernon			
Culinary Arts	Mount Vernon			
Dental Assisting	Mount Vernon			
Fire Science & EMS	Mount Vernon			
Marine Services	Anacortes			
Veterinary Assisting	Mount Vernon			
Video Game Development	Mount Vernon			
Welding	Meridian HS			
Welding	Bellingham Tech College			

**Mount Vernon Main Campus**

2205 West Campus Place, Mount Vernon, WA 98273

**Anacortes Campus**

1606 R Avenue Anacortes, WA 98221

**Sedro-Woolley Satellite Campuses**

1235 3rd Street, Sedro-Woolley, WA 98284

**Meridian High School**

194 West Laurel Road Bellingham WA 98226

**Bellingham Technical College Campus**

2205 West Campus Place, Mount Vernon, WA 98273

**Counselor Section:** Please note, all special education, medical and emergency documents must be received before an application is processed.

Sending High School \_\_\_\_\_

Is the student on track to graduate?  No  Yes

Is the student taking classes at home high school? \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_

IEP:  No  Yes IEP Qualifying Area(s): \_\_\_\_\_ Case Manager: \_\_\_\_\_

504 Plan:  No  Yes

Emergency Plan:  No  Yes

Medical Alert:  No  Yes

Student's Current Attendance overall:  Exceptional (0-3 absences)  Good (4-7)  Fair (8-15)  Poor (15+)

Transcript attached:  No  Yes

Any other information or concerns we should be aware of with this student? \_\_\_\_\_

Counselor/School Representative Name PRINT \_\_\_\_\_

Counselor/School Representative Signature \_\_\_\_\_ Date \_\_\_\_\_