Student Application Heavy Equipment Technology

A Partnership between Wilco Area Career Center & ASIP Local 150 Operating Engineers

| Name | | | Date |
|---------------------|---------|--------------|------------|
| (Last) | (First) | (MI) | |
| Home Address | | | |
| (Street) | | (City) | (Zip code) |
| Date of Birth | | Home Phone _ | |
| Home School | | | |
| Parents or Guardian | | | |

Current Year Courses (Including both semesters)

| Career & Technical Courses | 1 st Semester Grade | Current Grade | Teacher |
|----------------------------|--------------------------------|---------------|---------|
| | | | |
| | | | |
| | | | |
| | | | |
| Other Courses | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Please attach a copy of your high school transcript.

What are your career goals?_____

What are your post-secondary educational plans? _____

The heavy equipment technology program provides equal opportunities to all people without regard to age, gender, disability, marital status, race, color, creed, national origin or religion.

| Have you applied to, | been accepted by, or | r plan to apply to a | post-secondary educational |
|----------------------|----------------------|----------------------|----------------------------|
| institution? | Yes | No | |

If yes, name of Institutions (s) and major Institution

Major Area of study

Why are you interested in participating in the heavy equipment technology program? (Additional space may be used to complete your answer.)

Do your parents know of your interest in the program? _____Yes ____No

In making this application I accept responsibility for maintaining eligibility, following the rules, which have been established for participation. I certify that all the statements made above by me, in this application are true, complete and correct to the best of my knowledge, and I am aware that any false statements will be sufficient cause for dismissal from the program. Unless notified in writing by the student's parent/guardian stating that they do not wish their child's picture to be used for public use, pictures taken of students may be placed in publications, display or presentations. This includes but not limited to videos, computers, website or articles placed in newspapers. I am also aware that the student must pass a drug test that will be administered by ASIP Local 150 Operating Engineers.

Student Signature

Date

Student (printed name)

| I consent to | (student name) participating in the heavy |
|---|---|
| equipment technology program at ASIP Lo | cal 150 Operating Engineers. |

Parent or Guardian

Date

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