

MINGO EXTENDED LEARNING CENTER

APPLICATION FOR ADMISSION

General Instructions:

To complete the application process you must do the following:

1. Complete this form and bring it with you to Mingo Extended Learning Center.
2. Call for an appointment with the Admissions Counselor to complete the application process.
3. Bring the following information with you to the conference with the Admissions Counselor: this application, a copy of your birth certificate, driver's license, and a high school transcript or diploma, or GED or TASC report of scores.
4. All LPN applicants must take a pre-entrance assessment test and meet requirements for the desired program prior to registering. The testing fee is \$50.00. A study guide is available for \$30.00. Tests are scheduled at MELC location in Delbarton, WV.
5. All students must complete the FAFSA our school code is 004212400. Go to www.fafsa.gov.
6. Students enrolling in WV Career & Tech. Programs are now required to take the TABE test and meet minimum score requirements. Contact Josh May at (304) 235-2022.

FINANCIAL AID

Financial aid is available for those who qualify. WE DO NOT PARTICIPATE IN STUDENT LOAN PROGRAMS. Please call the financial aid counselor for more information.

Kristi Davis 304-475-3347 ext. 13

Please Print

Last Name _____ First Name _____ Middle _____

Address _____ City _____ State _____ Zip _____

Phone: Home _____ Cell _____ SS# _____

Email _____ Birthdate _____ City, State of Birth _____

Are you a West Virginia resident? Y/N If Yes, how many years? _____

Are you a United States citizen? Y/N If No, what type of VISA do you have? _____

Are you a high school graduate? Y/N High School Name _____

Do you have a GED or TASC? Y/N If Yes, what county was it taken? _____

Have you ever been convicted, pled guilty, or pled no contest to a felony or misdemeanor? Y/N If Yes, Explain _____

Previous schools attended after high school: _____

REQUESTED PROGRAM

PRACTICAL NURSING BUSINESS

Therapeutic Services

PART TIME

___ Practical Nursing 1

___ Administrative

___ Fundamentals of Nursing

___ Excel

___ Practical Nursing 2

___ & Business Support

___ Electrocardiogram

___ Word

___ Practical Nursing 3

___ Medical Office

___ Phlebotomy

___ Power Point

___ MOS

___ Access

Participating Financial Aid Agencies: Please mark appropriate one(s):

Pell _____

HEAPS _____

DHHR _____

Vocational. Rehab _____

WIA _____

TAA _____

Veterans _____

Others _____

I certify that all statements in this application are complete and true. I give Mingo Extended Learning Center permission to use this information for internal statistical and reporting purposes. I further understand that any willful misrepresentation of information given may be grounds for denial of my admission or dismissal.

STUDENT SIGNATURE _____ DATE _____