**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WVEIS Number\_\_\_\_\_\_\_\_\_\_\_\_\_ High School \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Best number to reach parent/guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Programs Offered***

***INDICATE IN WHICH PROGRAMS YOU WISH TO ENROLL*** *(Please pick your top 3 choices)*

***IF APPLYING FOR MORE THAT ONE PROGRAM, PLEASE INDICATE YOUR 1ST, 2ND, AND 3RD CHOICE.***

\_\_\_\_\_\_\_\_ Agriculture \_\_\_\_\_\_\_\_\_\_\_ Pet Grooming \_\_\_\_\_\_\_\_\_\_ High School of Business

\_\_\_\_\_\_\_\_ Business Management and Administration \_\_\_\_\_\_\_\_\_\_ Health Occupations

\_\_\_\_\_\_\_\_ Careers in Education \_\_\_\_\_\_\_\_\_\_ ProStart Restaurant Management

**\_\_\_\_\_\_\_\_**Please check if you are currently in a TVHS program and want to return.

**What is your reason for wanting to enroll in this program?** (Note: You will only be selected for 1 program)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**What are your plans after high school? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**References:**

* **Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Someone not related to you)**

* **Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Someone not related to you)**

**Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Non-Discrimination: This Company prohibits discrimination against or harassment of any person employed by or seeking employment with the CTE program because of race, creed, religion, color, or national origin or because of age, physical or mental disability, or sex.*

**-------------------------------------------------------- Do Not Write Below This Line -------------------------------------------------------**

**(For School Use Only)**

Student GPA \_\_\_\_\_\_\_\_\_\_ Days Absent Last Semester \_\_\_\_\_\_\_\_\_ Credits Earned Toward Graduation \_\_\_\_\_\_\_\_\_