

CUTTC Student Application for Admission

Name: _____ Date of Birth: _____ SSN: _____

Address:(include city, state and zip) _____

Cell/Home Phone: _____ E-mail Address: _____

Emergency Information

Primary Doctor's name: _____ Phone Number: _____

Known Medical Conditions: _____

Allergies: _____ Current Medications: _____

Emergency Contact Name: _____ Relationship: _____

Phone Numbers: _____

Employment and Personal Information

1. Name of the program for which you are applying: _____

2. Who referred you to CUTTC? _____

3. Are you employed? *circle one* Full-time Part-time Unemployed PRN

4. Employer Name: _____ Job Title: _____

5. Marital Status: _____

6. Number of persons < 18 years of age living in household _____ Number > 18 years of age? _____

7. Do you receive financial assistance from any other source? _____ If yes, what? _____

8. Have you ever been convicted of a felony? _____

9. Have you ever been convicted of a misdemeanor drug charge? _____

Please explain any "Yes" answers: _____

10. Are you willing to submit to a drug screening if requested? _____

Education Information

1. In what year and where did you receive your high school diploma or GED? _____

2. Have you had any college or other educational classes? _____ If yes, when and where? _____

3. Do you have any special training, certifications or other accomplishments you wish to share with us? _____

Personal Attributes

Please tell us about any qualities or qualifications that you feel would make you a candidate to be accepted into this program. Include past or current community involvement, jobs, skills, volunteer activities, church involvement, etc.

Pre-Admission Goal Assessment

Please state at least 2 things you expect to accomplish as a result of completing this class.

1. _____

2. _____

Pre-Admission Resource Assessment

Do you feel you have adequate resources in place to help you complete this program successfully?
(computer usage, childcare, transportation, etc.) _____

If "No", what needs do you
have? _____

In compliance with federal law, including provisions of Title IX of the Education Amendments of 1972 and Section 504 of the Rehabilitation Act of 1973. Campbellsville University does not illegally discriminate on the basis of race, gender, color, national or ethnic origin, age, disability, or military service in its administration of education policies programs, or activities; admission policies; or employment. Under Federal and Kentucky law, the University may make certain policy and employment decisions based in part on its religious beliefs in order to fulfill its purpose as a Christian institution. Inquiries should be directed to: Mr. Terry VanMeter, Director of Personnel Services; Campbellsville University; UPO 783; 1 University Drive; Campbellsville, KY 42718; telephone 270-789-5016;

twvanmeter@campbellsville.edu.

This section to be completed by CUTTC staff member

Date completed application received: _____ Date of admission interview: _____

Interviewed by: _____

Accepted for Admission: _____ Program admitted to: _____

CUTTC Mailing Address

Campbellsville University Technology Training Center
1 University Drive, UPO 799
Campbellsville, KY 42718
270-789-5400
Fax: 270-789-5398