



# Parkway West Career & Technology Center

7101 Steubenville Pike, Oakdale PA 15071 (412) 923-1772. [www.parkwaywest.org](http://www.parkwaywest.org)

## Application for Student Admission

~ 2020-2021 ~

Student's First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Number: \_\_\_\_\_ School District: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ High School Name: \_\_\_\_\_  
Gender: M / F Ethnicity: \_\_\_\_\_

### Father/Guardian

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Phone #: \_\_\_\_\_

### Mother/Guardian

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Phone #: \_\_\_\_\_

### IN CASE OF EMERGENCY CALL

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_  
*(The above information is used for permanent record information only upon the student's acceptance)*

## CAREER MAJORS

Indicate with a (1) your first choice and a (2) for your second choice

<input type="checkbox"/> Auto Body Repair	<input type="checkbox"/> Culinary Arts	<input type="checkbox"/> Health Occupations Technology
<input type="checkbox"/> Automotive Technology	<input type="checkbox"/> Cyber Security & Network Technology	<input type="checkbox"/> Public Safety Technology
<input type="checkbox"/> Construction Cluster <i>Carpentry, Electrical Systems HVAC/R, Welding Technology</i>	<input type="checkbox"/> Diesel Technology	<input type="checkbox"/> Veterinary Assistant Technology
<input type="checkbox"/> Cosmetology	<input type="checkbox"/> Graphic Arts & Production Technology	<input type="checkbox"/> Sports Medicine & Rehab Therapy

## CERTIFICATE PROGRAMS

☐ Nail Technician ☐ Pharmacy Technician ☐ Phlebotomy Technician

*Permission is granted for my son/daughter to apply to Parkway West Career and Technology Center. Authorization is granted for the release of his/her school transcript and any other pertinent educational information.*

### To be completed by sending district official:

School Official Signature: \_\_\_\_\_

PA Secure ID: \_\_\_\_\_ Grade level when entering PWCTC: \_\_\_\_\_

IEP: YES ☐ NO ☐ 504: YES ☐ NO ☐ ELL: YES ☐ NO ☐ TRANSCRIPT: YES ☐ NO ☐

Parkway Session: AM ☐ PM ☐

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

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

It is the policy of Parkway West CTC not to discriminate on the basis of race, sex, religion, color, national origin, handicap or limited English proficiency in its Educational Programs, Activities or Employment Policy as required by Title IX of the 1972 Educational Amendments, Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the American Disabilities Act.