

# Collision Repair Technology

## Lex La-Ray Technical Center

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Phone \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Gender:  Male  Female    Ethnicity:  White  Black  Hispanic  Asian  Am Indian  
 Alaska Native  Native Hawaiian  Other Pacific Islander

I am currently a  Sophomore  Junior at \_\_\_\_\_ School    MOSIS# \_\_\_\_\_

Name of parent or guardian with whom you live \_\_\_\_\_

How did you hear about this program?  Friend  Counselor  Teacher  Program of Studies  
 LLRTC Website  LLRTC staff presentation  Other: \_\_\_\_\_

### Program Prerequisites (Grades 11/12):

- \* 10<sup>th</sup> grade reading, writing, and math levels
- \* Strong mechanical aptitude
- \* Attendance at 90% or better
- \* GPA of 2.0 or better

### Program Recommendations:

- Industrial Technology courses
- Metals class(es)
- Art class(es)
- Computer Applications

*Student contribution to course expenses will range from \$10-\$100.*

Your school will assess your application and forward to Lex La-Ray Technical Center the applications of the candidates it feels meet the criteria for an interview with Lex La-Ray Technical Center.

### ***Your application will be assessed by your school on the basis of the following factors:***

- \*Program prerequisites                      \*Attendance                                      \*Recommended coursework
- \*Personal Plan of Study                      \*Number of high school credits earned to date

..... *Do not write below this line (Sending School Counselor Use Only)* .....

### ALL DOCUMENTS BELOW MUST ACCOMPANY THIS APPLICATION

**Counselors** - Please check off boxes as you complete the application packet. Also, please furnish the requested, bold-faced information listed below. Thank you.

- Transcript & Current Schedule (indicating GPA of 2.0 or better)    **Cumulative GPA = \_\_\_\_\_**
- Record of attendance:    **Attendance Percentage = \_\_\_\_\_**
- Personal Plan of Study (4+Year Plan)
- Student essay
- IEP or 504 Plan (if applicable)
- Student scholarship form signed by the student, parent, principal, counselor, and case manager (if applicable)
- Counselor and Case Manger recommendation (if student does not meet all of the program prerequisites).

**This student does not meet the following criteria:** \_\_\_\_\_

**College Credit Opportunities:** Lex La-Ray has partnered with area community colleges to offer dual credit and articulated credit. Please check with the counselor at Lex La-Ray for additional information. These credits can assist students who wish to earn credit toward an associate's degree. Students can also return to Lex La-Ray as a Post Secondary student, please check with the counselor for more information.

**Notice:** Completion of this application by itself does not constitute admission to Lex La-Ray Technical Center or placement on a waiting list for a program that may be full at the time application is made.

**Admission to Lex La-Ray Technical Center is not prohibited or limited because of color, race, national origin, sex, age, or disability. Any person having inquiries concerning compliance, contact the Director of Special Services, 2323 A High School Drive, Lexington, MO 64067, Telephone (660) 259-4369 ext. 5005. (rev. 10/05/12)**