

### **CAREER READY APPLICATION**

PO Box 2000/801 Main Street NW Hanceville AL 35077



### **DUE APRIL 14, 2023, FOR FALL 2023 STUDENTS**

#### **Career Ready Programs include the following:**

Agribusiness/Horticulture, Automotive Service Technology, Child Development, Computer Science, Diesel Technology, Emergency Medical Services, Engineering Technology, Health Information Technology, Heating and Air Conditioning (HVAC), Mechatronics, Medical Assistant, Medical Laboratory Technology, Office Administration, Paralegal, Machine Tool Technology, Welding Technology

Technician, (	Office Administration, Parale	gal, Machine Tool Technology, Welding Technology			
(For College Use Only)  Received://  MM DD YYYY  Student Accepted □Yes □ No	require your c	Complete and sign pages 1-2 of this packet and submit entire packet with required signatures to your High School Counselor. Your Counselor will attack your current HS transcript and return to the WSCC Dual 2 Degree Departmen Incomplete applications will not be considered.			
**Please note that applications receiv	ed after the deadline wil	l only be considered if space is available.			
Student A Number:					
·		s application in order to receive a student number. Admissions ttps://www.wallacestate.edu/admissions/apply-online.			
High School Attending:		What Grade are you currently in?			
ntended Major or Program of Study: _					
First Name:	Middle:	Last:			
Address:					
City: Zip: _	E-Mail Ac	ddress:			
Date of Birth (MMDDYYY):	Age:	Student's Phone Number:			
Provide information for the parent/g	uardian(s):				
Parent (Step)Name:		Occupation:			
Email address:		Phone Number:			
Parent (Step)Name:		Occupation:			
Email address:		Phone Number:			
With the collection of the Alabama Court Based of S					

It is the policy of the Alabama State Board of Education and Wallace State Community College, a postsecondary institution under its control, that no person shall, on the grounds of race, color, sex, religion, national origin, disability or age, be excluded from participation in, be denied benefit of, or be subjected to discrimination under any program, activity, or employment.

Checklist: Applicants Must Include All of the Follo  WSCC Student A Number:  Complete WSCC online application for admissions. I log in instructions for student number.  Current Official High School Transcript (HS Counsel	http://www.wallacestate.edu/admissions/apply-online See myWallaceS
Complete WSCC online application for admissions. I log in instructions for student number.  Current Official High School Transcript (HS Counsel	lor will Attach)
Complete WSCC online application for admissions. I log in instructions for student number.  Current Official High School Transcript (HS Counsel	lor will Attach)
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Current Official High School Transcript (HS Counsel	
ACCPLACER Placement Exam or comparable ACT So	cores (minimum of 19 in English and 20 in math)
	Joles (Illillillian of 18 ill English and 20 ill math)
Parent/Student Signature I	Required for Application to be Complete
n for Access to Educational Records: (student initials requ	uired after each statement)
or the program. I authorize Wallace State Community Co	ace State Community College to have access to any school records to determine ollege to release to the high school listed on this application all grades earned in I
mission for Welloop Chata Community C. II	ations and alternate all annual and are considered to the state of the
rguardians □ nigh school representatives □ companies	with which i receive internships/apprenticeships
ompliance with the Family Educational Rights and Privac	cy Act of 1974, as provided by Public Law 93-380.
nu that all wocc dual emolinent grades earned will app	real of my permanent conege transcript.
ee students are responsible for paying all tuition and fees ents will be granted each semester to programs that quali	s. Pending available funds, a scholarship covering 2 CTDE courses for Career ify (\$200 books/supplies stipend may be awarded for CTDE programs as
uation fee may vary each year. Check the WSCC graduatio	on information online for current rate(initial)
no meet the criteria for initial admissions to a Dual Enrollr deedure for Dual Enrollment for Dual Credit for High Schoo attempted college courses is earned. Students who fail to from the program for a minimum of one term. The one te re-enrollment to the Dual 2 Degree program; however, th	ment for Dual Credit program as specified in the ACCS (Alabama Community Coll ol Students Section 2, will remain in continuous eligibility as long as a grade of "Co meet this minimum grade requirement or who withdraw from a course will be the suspension may not be served during the summer term. Students will not be not student may re-enroll as a dual enrollment student after one term suspension the minimum requirements. Students re-entering as dual enrollment will be respondies(initial)
Signature	Date
	ve my permission for the Dual 2 Degree Program at Wall or the program. I authorize Wallace State Community College

### **School Recommendation**

## To be completed by high school personnel only.

Stud	ent Name:					
	survey contains a number of statements or questions about the applicant. Please submi uation. Your answers will be kept confidential.	t this to	a teacl	her for	their	
Ple	case rate the following from 1 (poor) – and 5 (excellent)	1	2	3	4	5
1.	Applicant exhibits good study skills.					
2.	Applicant behaves well in class (consider number of disciplinary referrals).					
3.	The applicant has a satisfactory attendance record.					
4.	Applicant exhibits mature behavior to integrate onto a college campus.					
5.	This applicant would benefit from participation in the Fast Track Program.					
6.	This student is on track to graduate. (Completed 12 credits at the end of their $10\text{th}$ grade year)		Yes		No	
7.	Current Unweighted High School GPA (on a 4.0 scale):					
8.	ACT Scores: ENGLISH MATH (The ACCUPLACER placement explace of ACT scores - students must submit test scores with application of					
Co	mments:					_
						_
Co	unselor Signature: Date Signed:					
Pri	ncipal Signature: Date Signed:					

# To be completed by the counselor

# **GRADUATION REQUIREMENTS CHECK LIST**

Student Nam	e:			
Units passed	will have a ch	eck in the che	ck box.	
REQUIRED CO	OURSES			
-		eded to gradua	ite)	
	or curts are ric	caca to graduo		
9 <sup>th</sup> Grade 10 <sup>th</sup> Grade 11 <sup>th</sup> Grade 12 <sup>th</sup> Grade	(1) 0.5 (1) 0.5 (1) 0.5 (1) 0.5	(2)0.5 (2)0.5 (2)0.5 (2)0.5		
MATHEMATI	CS (4 credits	are needed to	graduate)	
9 <sup>th</sup> Grade 10 <sup>th</sup> Grade 11 <sup>th</sup> Grade 12 <sup>th</sup> Grade	(1) 0.5 (1) 0.5 (1) 0.5 (1) 0.5	(2) 0.5 (2) 0.5 (2) 0.5 (2) 0.5 (2) 0.5		
SOCIAL STUD	IES AND HIST	ORY (4 credits	s are needed to graduate)	
9 <sup>th</sup> Grade 10 <sup>th</sup> Grade 11 <sup>th</sup> Grade 12 <sup>th</sup> Grade	(1) 0.5 (1) 0.5 (1) 0.5 (1) 0.5	(2) 0.5 (2) 0.5 (2) 0.5 (2) 0.5	World History United States History I United States History II Economics / American Government	
SCIENCE (4 cr	edits are need	ded to graduate	e)	
9 <sup>th</sup> Grade 10 <sup>th</sup> Grade 11 <sup>th</sup> Grade 12 <sup>th</sup> Grade	(1) 0.5 (1) 0.5 (1) 0.5 (1) 0.5	(2) 0.5 (2) 0.5 (2) 0.5 (2) 0.5 (2) 0.5		
<u>L.I.F.E.</u> (Lifelo	ong Individual	ized Fitness Ed	ucation) (1 credit is needed to graduate)	
	(1) 0.5	(2) 0.5		

To be completed by the counselor
Graduation Requirement Checklist Cont.
Student Name:
HEALTH (½ credit is needed to graduate)
(1) 0.5
CAREER PREPAREDNESS (1 credit is needed to graduate)
(1) 0.5 (2) 0.5
CAREER TECH EDUCATION AND/OR FOREIGN LANGUAGE AND/OR ARTS EDUCATION  (3 credits are needed to graduate - please list which courses have been taken.)
(1) (2) (2)
(1)0.5 (2)0.5
(1)0.5 (2)0.5
<b>ELECTIVES</b> (2 ½ credits are needed to graduate - please list which courses have been taken.)
(1) (2) (2)
(1) 0.5 (2) 0.5 (1) 0.5
TOTAL NUMBER OF CREDITS EARNED TO DATE:  (This number \index does / \index does not include credits for the current semester)
(This numberdoes /does not include credits for the current semester)
**Please attach copy of student's high school transcripts to this form.
Principal Signature/Date Counselor Signature/Date