

Prospective students should review admission procedures in the **PBTCC School Catalog**, which has information about instructional programs, the admission and financial aid processes, and the Poplar Bluff Technical Career Center in general. Completed applications should be submitted to the PBTCC main office at 3203 Oak Grove Road, Poplar Bluff, MO 63901, prior to deadlines. Incomplete applications will not be considered for admission.

Failure to complete admission requirements by specific program cutoff dates may result in non-consideration for admission. No student will be considered as officially enrolled until all admission requirements are met. No student will receive financial aid distributions until all admissions requirements are met.

The number of students enrolled in specific programs is limited to the number of available openings and/or pre-set number of allowable students per program of study. Students applying to PBTCC programs are accepted according to the approved selection process as outlined in each program's section. PBTCC programs are clock hour non-continuous enrollment. No student will be admitted to or allowed to begin a program five days after the first scheduled class.

Upon approval for admission, the student will receive a letter of acceptance with instructions regarding the next steps in the process to secure enrollment. It is vital these instructions are followed in the prescribed timeframe. Failure to do so may forfeit the student's enrollment in the program. For further information contact the specific program coordinator or the Adult Education Coordinator.

The Poplar Bluff Technical Career Center can assist qualified students with the financial aid process. The first step in the process is determining eligibility. To determine eligibility for most financial aid sources, students are required to complete the Free Application For Federal Student Aid (FAFSA). The Missouri priority deadline for completion of the FAFSA is April 1. More information regarding Student Financial Aid can be found in the school catalog.

The PBTCC School Catalog and Admission Application and Application can be accessed through our website. Please visit us at 3203 Oak Grove Road during office hours (8:00 a.m. to 4:00 p.m.) or call 573-785-2248 for more information.

Charles W. Kinsey – Director

Poplar Bluff Technical Career Center

2018-2019

Application for Admission - Postsecondary Programs

3203 Oak Grove Road
Poplar Bluff, MO 63901
573-785-2248 573-785-4168 (fax)
573-785-6683 School of Cosmetology
573-785-7751 Mules Café Extension Campus -
1110 N Westwood Blvd, Poplar Bluff, Missouri 63901

www.poplarbluffschoools.net

Return this completed application and the appropriate non-refundable application fee. Make check payable to PBTCC. The application fee covers the cost of admission examinations and background check. Applications are not processed or considered complete until both fee and application are received. Completion of this application does not constitute admission to the program of study for which applicant is applying.

Part 1	Personal Information		
Social Security No. _____/_____/_____			
Name _____			
_____ Last	_____ First	_____ Middle	_____ Jr/Sr
Maiden/Alias _____		_____ Middle	_____ Jr/Sr
_____ Last	_____ First	_____ Middle	_____ Jr/Sr
Address _____		City _____	State _____ Zip _____
Telephone - Home: _____ - _____ - _____		Telephone - Cell _____ - _____ - _____	Business: _____ - _____ - _____
Email _____		Date of Birth _____/_____/_____	
Does student use language other than English? ____ If so, what language: _____			

Part 2	Program Choice
Clearly mark the desired program of study.	
Cosmetology	Application fee \$25
<input type="checkbox"/> Cosmetology/Manicure August Class - Applications accepted March 1 through May 1.	
<input type="checkbox"/> Cosmetology/Manicure February Class - Applications accepted September 1 through November 1	
<input type="checkbox"/> Cosmetology/Manicure Additional Hours - See program coordinator for application submission information.	
<input type="checkbox"/> Cosmetology Instructor Training - See program coordinator for application submission information.	
<input type="checkbox"/> Esthetician - Applications accepted September through October 1	

Technology & Industry	Application fee \$25	
Applications will be accepted March 1 until June 30. After June 30 applications will only be accepted for programs with available openings.		
<input type="checkbox"/> Automotive Collision Repair	<input type="checkbox"/> Automotive Technology	<input type="checkbox"/> Building Trades
<input type="checkbox"/> Computer Maintenance Technology	<input type="checkbox"/> Culinary Arts— Mules Café-Extension Campus	<input type="checkbox"/> Welding
<input type="checkbox"/> Computer Graphics & Print Technology	<input type="checkbox"/> Heating, Ventilation, Air Conditioning & Refrigeration (HVACR)	

Part 3**Emergency Information**

In case of emergency, please notify:

Name _____ Relationship to Student _____

Address _____ City, State, Zip _____

Home/Cell Phone _____ Work Phone _____

List any medical conditions PBTCC staff may need to be aware of: _____

In the event of an emergency I authorize Poplar Bluff Technical Career Center personnel in charge to use their discretion regarding emergency procedures.

Student Signature _____ Date _____

Part 4**Student Status Information**

(the following information is optional)

Gender: Male FemaleMarital Status: Single Married Divorced Widow/Widower

Ethnic Description:

 Nonresident Alien Asian Black, Non-Hispanic Hispanic American Indian or Alaskan Native White, Non-Hispanic Pacific Islander Two or More Races Race/Ethnicity Unknown other: _____I am eligible for the A+ Scholarship: Yes No I have received a bachelor's degree: Yes NO

I am eligible and will receive funding from the following agency to pay educational expenses:

 VA Benefits Vocational Rehabilitation WIA TRA Private Company – name of company _____ Other: _____

Please list the name, address and social security number of the person eligible to claim the tax credits associated with the payment of tuition and related fees:

Name: _____ Social Security Number _____

Address _____

City _____

Zip _____

Part 5**Education Information and Work Experience**

Name of high school: _____

City _____ State _____

Graduated (year) _____ or Will Graduate (year) _____ GED/HiSet (year) _____ Certificate No. _____

Official high school transcript or GED/HiSet scores must be forwarded to PBTCC to fully complete admission process.

Other Education Beyond High School – Official post-secondary school transcript must be forwarded to PBTCC to fully complete admission process.

Name of School _____ City & State _____ Degree/Certificate _____ Dates of _____

Earned

Attendance

Have you ever experienced disciplinary or academic probation while attending a postsecondary institution of learning? _____ If yes, please attach detailed explanation.

Work Experience

List work experiences related to your field of study. Include experiences you feel are of benefit to you in your chosen field of study.

Employer _____ Position/Job Title _____ Years/Months Job Held _____

Part 6

TO BE COMPLETED BY ALL APPLICANTS

Have you ever been arrested and/or convicted of a felony or misdemeanor? _____ If yes, please explain.

My signature below gives the Poplar Bluff Technical Career Center permission to perform a background check. I understand that my Social Security number and other personal data provided on this enrollment application may be used as an identifier. I further understand that the misrepresentation or omission of facts called for is cause for non admittance or dismissal from a Poplar Bluff Technical Career Center program of study.

Signature of Applicant

Date

The Poplar Bluff Technical Career Center is an Equal Opportunity Employer and operates educational programs which do not discriminate on the basis of age, race, color, creed, religion, nationality origin, sex, marital status or handicap. The School district is prohibited from discriminatory practices by Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act, Title II of Americans with Disabilities Act of 1990 and various state laws and regulations.

Return completed application, including the completed request for Criminal Record Check form and appropriate application fee to:

**Poplar Bluff Technical Career Center
3203 Oak Grove Road
Poplar Bluff, MO 63901**

Part 7

Functional Abilities Statement

The Poplar Bluff Technical Career Center programs require certain functional abilities a student must be able to do, possess, or be able to be taught in order to successfully complete the programs of study and perform in the chosen career fields. Refer to admissions section in the student catalog for the list of functional abilities required of students admitted into these programs.

I certify that I am physically and mentally able to perform the usual duties and functions associated with those of a nurse or cosmetologist and/or that I possess the capability to learn functional abilities as listed in student catalog in order to fulfill program requirements.

Signature of Applicant

Date

Complete Application Check Sheet (bring all listed items when turning in application to ensure priority processing):

- Official (Sealed) High School Diploma or GED/HiSet
- Proof of Immunizations
- Birth Certificate
- Driver's License
- Social Security Card
- Proof of Residency (Official mail to your home address or address listed on application, i.e. utility bill, cell phone bill, etc.)
- Marriage License & Divorce Determination (Cosmetology and LPN Only)

APPLICATION CHECKLIST

Application - Date Received: _____
Application Fee Paid? ___yes ___no Amount Paid \$ _____
___ High School Transcript or GED/HiSet scores; ___
___ College Transcript if applicable;
___ Proof of Immunizations;
___ Background Check Completed;
Credentials Received:
___ birth certificate ___ marriage license ___ driver's license ___ Social Security Card
___ Proof of Residency: ___ In-District ___ Out-of-District

For Office Use Only – Do Not Write In This Area

Poplar Bluff Technical Career Center Applicant Professional Reference Form

All Cosmetology applicants are to request **three professional references** complete and forward
a Personal Reference to:
Poplar Bluff Technical Career Center 3203 Oak Grove Rd, Poplar Bluff, MO 63901.
Preferred personal references are those who can provide

I, _____, have applied for entrance to the Poplar Bluff Technical Career Center Cosmetology (circle one) program and hereby give my permission to release this information.

Name of person completing this form (please print): _____ Date _____

How long have you known the applicant? _____

In what capacity or relationship to the applicant are you completing this reference? _____
(employer, immediate supervisor, co-worker, teacher, counselor, etc.)

From your experience with this individual rate the following characteristics. Check one level of performance for each category.

	Excellent	Good	Fair	Poor
Integrity				
Dependability				
Punctuality				
Initiative				
Moral/Ethical Character				
Industriousness				
Grooming				

Do you know of any physical or emotional handicap that would influence this individual's performance in their chosen program of study? _____ If so, please specify

Would you employ this individual for a position which requires responsibility and stability? _____ If no, please state reason:

Would you recommend to the Poplar Bluff Technical Career Center that this person be admitted to their chosen program of study? _____

Additional Comments:

In order that the applicant may be considered for admission, please complete this form and return it to the school at your earliest convenience. Please **DO NOT GIVE** it to the applicant. The applicant **WILL NOT** be seeing this completed form at any time and it will be destroyed after the application process has been completed. All information will be kept confidential. Feel free to contact the school for any further information.

Signature of Person Completing Form _____ Address _____ State _____ Zip _____

Cosmetology Coordinator
Susan Chronister
schronis@pb.k12.mo.us
573-785-6683

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