

## **APPLICATION FOR ADMISSION**

PLEASE PRINT CLEARLY IN INK

1. Legal name: Last		First		Midd	le	10. Date	e of Birth (M	MM/DD/YY)			
	( ) ( ( ) ( ) ( )					11. Gen	der: Mo	ale 🗌 Female	•		
2. Former last name(	(s) (it applicable)					12. Are	you a U.S. '	Veteran? 🔲	Yes 🗌 No		
3. Current mailing a	ddress							Citizen? 🗌 Y U.S. on a Visa			•
4. City		State		Zip Co	de			U.S. permane			
5. Permanent addre	ss (if different)							a U.S. Citizen			
6. City		State	,	Zip Co	de		n a legal res	sident of (select	one) City	Village	Township
7. Primary phone nu	mber Seconda	ry phone num	nber 🗌 Hom	ne Cell \	Work	14b. City	/Village/Tov	vnship	Coun	ty S	State
8. E-mail address											
9. Social Security Nu	mber					15. Nan	ne of high s	chool district	in which y	ou now re	eside
The following quest affect admission to	ions are confidential. the college.	Your respons	ses will help	the technica	l colleg	je evaluate	recruitme	nt and reten	tion practi	ces and w	vill not
16. Select highest de	egree earned by either	parent: Hi	igh school d	iploma 🗌 As	sociate	degree [	] Bachelors	degree []	Masters or	beyond	
_	ons relate to racial and		-				_	v _		,	
	nic or Latino (a person c						or other Spo	anish culture c	or origin, re	gardless o	f race)?
	er group or groups the	at apply to you	U.								
	an or Alaska Native. A			include native	people	es of North	and South	America (incl	uding Cen	tral Ameri	ica),
	tains a tribal affiliation		•								
	on whose ancestors incl nina, India, Japan, Kor								luding, for	example,	
	ın American. A person							,.			
	an or other Pacific Islar							, Guam, Sam	noa or othe	er Pacific I	slands.
	on whose ancestors inc										
18. I wish to attend	Northwood		Tech	nnical College	at					Cam	pus
	ed this college before?	Yes [	 □ No	If yes, last y	ear an	d semester	attended				
20. Semester you wis	sh to begin: 🗌 Fall	Spring [	Summer	(if applicable)	Yeo	ar					
21. Program/major d	choice					(if known)					
22. Name of last hig	h school attended						City			State	
Are you a high school	ol graduate? 🗌 Yes	□No	If yes, pleas	e enter your g	<sub>j</sub> raduati	ion date (m	onth/year)				
23. If you did not con	nplete high school and r	eceive a diplo	ma, have yo	u completed e	ither the	e GED® Test	s Yes	□ No o	or HSED?	Yes	□No
If yes, date comp	oleted (MM/YY)			Test center							
24. Circle or identify	highest grade complet	ted: 8 9	10 11 1	- 2 13 14	15	16 17					
25. Select highest cre	edential received:										
	ge (postsecondary cred	it)			Associa	ite degree					
Short-term							olus additio	nal credentia	I		
1-year diplo					Baccalo	aureate nan baccalc	uroato				
		uandad / . W·	المادة والمستقالة								
College/University N	eges and universities a	,		will be requir	ed for (	creait transt	'	ovince Date o	attandad F	ato aradi	ıatod
Conege/ Orniversity IN	unic		City				Jiule/ FT	ovince Dale (	anenueu L	vale gradi	Juicu
											_
27. I certify that the i	nformation on this app	olication is true	e and comp	lete to the bes	st of my	knowledge	<b>:</b>				
Date			Si	gnature	,	,					



30-109-2 Hospitality Foundations Functional Abilities Disclosure

It is the intent of Northwood Technical College to fully comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S. C & 794), the Americans with Disabilities Act (ADA) of 1990 (42 U.S.C & 1201. *et seq.*), and the ADA Amendment Act of 2008. In accordance with these laws, Northwood Technical College does not provide students with personal devices and services.

In order to assist students to successfully complete this program, Northwood Technical College has developed a set of objective functional ability criteria. At the time of application, students are asked to sign the Functional Ability Disclosure stating whether or not they are able to meet the functional abilities, with or without accommodations, as stated in this document. Students entering the program based on falsification of records related to their ability to meet functional requirements, may face disciplinary action. The signed acknowledgement of this information will be filed in the student's permanent record. If the student is required to sign the form again at a later date designated by the program requirements, the signed form will be kept on file in the student's record maintained by the program director/faculty for five years, then destroyed.

For students with a disability, reasonable accommodations are available. Reasonable accommodations are defined as modifications or adjustments that allow individuals with disabilities to gain equal access and have equal opportunities to participate in Northwood Tech's courses, services, activities, and use of the facilities. To be eligible for disability-related services/ accommodations, students must have a documented disability. This documentation must be provided by a licensed professional, qualified in the appropriate specialty area. Northwood Technical College is not obligated to provide an accommodation that requires a substantial change in the curriculum or alteration of an essential element or function of a program /course. Northwood Technical College is also not obligated to provide an accommodation that poses an undue financial or administrative burden to the College or poses a direct threat to the health and/or safety of others.

Accommodations allowed, without disability documentation: supportive back brace or other supportive brace that does not impede required movement or interfere with infection control policies, hearing aids, glasses, and/or contacts. Other student-suggested accommodations will require the approval of the Program Director or Academic/Divisional Dean, the campus Accommodation Specialist, and the Wisconsin Department of Health Services (for Nursing Assistant only). All requests should be approved before the student is enrolled in the program. Any accommodation cannot substantially alter the requirements or nature of the program or provide accommodations that inflict an undue burden on the program.

If you are a person with a documented disability and would like to request accommodations, complete the Reasonable Accommodation Request Form and contact the Accommodations Specialist at your campus. It is recommended that reasonable accommodation requests be made 30 days prior to class start date to allow time for accommodations to be coordinated. Requests for reasonable accommodation must be made a minimum of fourteen (14) calendar days prior to the first day the service is needed.



30-109-2 Hospitality Foundations Functional Abilities Disclosure

### Functional abilities required for participation in this program are listed below:

#### **GROSS MOTOR SKILLS**

- Perform tasks requiring repetition
- > Bend, stoop, twist, kneel, squat quickly without losing stability or balance
- Reach above own shoulders to access or replace equipment and supplies and to perform duties
- > Arrange environment (equipment and supplies) ensuring a safe and sanitary environment
- Move within confined spaces
- Reach below waist (e.g. to plug in equipment and complete sanitation tasks)
- Reach in front of own body
- Have mobility to move with ease and speed according to industry standards
- Ability to manipulate and maneuver larger objects
- Push and pull objects
- Lift and carry objects

#### **FINE MOTOR SKILLS**

- Perform tasks requiring repetition and finger dexterity
- Pick up objects with hands
- Twist objects (e.g. opening containers)
- Squeeze objects
- Ability to have physical dexterity and steadiness within hands and fingers
- Perform tasks requiring repetition and finger agility

#### PHYSICAL ENDURANCE

- Tolerate long periods of sitting, standing, and/or walking/mobility without becoming fatigued
- Sustain repetitive movements

#### **HEARING**

- Distinguish normal sounds from background noises
- > Hear normal speaking level sounds
- Hear fire alarms and other emergency alert systems



30-109-2 Hospitality Foundations Functional Abilities Disclosure

#### **VISION**

- > Ability to see with normal or corrected vision
- See objects 20 inches away
- Use peripheral vision and depth perception (e.g. climb stairs
- Determine safety standards of equipment (e.g. loose nuts and bolts, frayed cords, dangerous areas, uneven surfaces, etc.)

#### **ENVIRONMENT**

Ability to navigate various surroundings and atmospheres

Tolerate the following:

- Exposure to chemicals and agents such as disinfectants, soaps, cleaners, bleaches, etc.
- Exposure to strong odors (e.g. cleaning supplies)
- Busy or active environments

#### READING AND WRITING

Understand charts, graphs and manuals

#### MATH

- Understand charts, graphs and manuals
- Measure quantities

#### **EMOTIONAL STABILITY**

- Adapt to changing environments/stress
- Manage or deal with the unexpected
- Respond to a crisis situation in a manner that maintains the health and safety of self and others
- Cope with own emotions
- Cope with strong emotions in others (anger, fear, grief, crying)
- Maintain honesty and trust with employer

#### **ANALYTICAL THINKING**

- Problem solve
- Evaluate outcomes
- Prioritize tasks
- Use long-term memory
- Use short-term memory



30-109-2 Hospitality Foundations Functional Abilities Disclosure

#### **CRITICAL THINKING**

- Plan and implement tasks
- Sequence information
- Make decisions
- Adapt decisions

#### INTERPERSONAL SKILLS

- Establish professional relationships
- Encourage and model positive social relationships and habits
- Interpret body language and respond appropriately

#### **COMMUNICATION SKILLS**

- Speak loudly
- > Speak at an understandable, conversational level
- Communicate appropriately with others
- Interpret non-verbal language

### **Functional Abilities Signature Statement**

Wisconsin Indianhead Technical College has developed a set of objective functional ability criteria for this program. By signing below, I am confirming that I have read and understand the bulleted information below and the information contained in this Functional Abilities Disclosure and that I am:

- Able to meet the Functional Abilities Criteria as presented with or without accommodation.
- > Will be provided with information concerning accommodations or special services upon request.

Signature:	Student ID:
Program: Hospitality Foundations	Date:



## **Student Questionnaire**

Student Nan	ie		

### **Rate Yourself:**

Category:	4	3	2	1	POINT TOTAL
Attendance	I am always there Attend classes or activities as scheduled at least 90% of the time	Consistent attendance of classes or activities as scheduled at least 80% of the time	I am occasionally there Attend 70% of classes or activities	I miss too often Ongoing Barriers Attend 60% or less of classes or activities	
Promptness	I am always on time On time for about 90% of classes or activities	I am usually on time On time for about 80% of classes or activities	I try, but late more than I should be On time for about 70% of classes or activities	I am late often  Late for about 60% of classes or activities	
Level of Engagement	l always participate in discussions and ask questions	I occasionally participate in discussions. I will ask questions if needed	I rarely talk or ask questions in classes or activities	I never talk or ask questions	
Listening Skills	I listen to people and never interrupt. I follow directions. People don't have to tell me to listen.	I occasionally stop listening, but not long enough to miss something.	I stop listening and this results in me missing things, but I talk with the teacher to figure it out	I do not listen well, and people have to tell me to pay attention.	
Preparation	I never miss anything. Almost always prepared for classes or activities	I occasionally will forget something, but I know right where it is and will tell someone.	I rarely come prepared, but will borrow or get help from others.	I am almost never prepared for classes or activities and that is okay with me.	
		Score Total			



## **Student Questionnaire**

Student Nan	ie		

Rate and explain participation in extracurricular activities and/or community activities. (What are you involved in?)

Please be specifics about the monthly hours for the last 12-months

Very Active 4	3	2	Not Active 1	

Rate and explain previous AND current participation in school or community work experiences. (What is your work experience and how much have you worked?)

Please be specific about how many hours worked per week

<u> </u>	3	2	1
ge Readiness: Explai	n why you are ready	for college.	
ge Readiness: Explai	n why you are ready	for college.	
ge Readiness: Explai	n why you are ready	for college.	
ge Readiness: Explai	n why you are ready	for college.	
ge Readiness: Explai	n why you are ready	for college.	



## **Student Questionnaire**

Student Name						
JIGGCIII INGIIIC_						

### Tell Northwood Tech More About You

Please complete in a format the works for you (You can create a video, PowerPoint, fill in the blanks etc.)

- 1. Tell us interesting things about you!
- 2. Why do you want to go to college to complete the Hospitality Foundations program?
- 3. What classes or what experience do you have in the area of hospitality?
- 4. What are your strengths and weaknesses?

Tell us interesting things about you!

do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
do you want to go to college to complete the Hospitality Foundations program?		
	·	



## **Student Questionnaire**

Student Name

hat are your strengths and weaknesses?  her information you want to share:		r what experience o			
	nat are vou	strengths and weal	(nesses?		
ner information you want to share:					
ner information you want to share:				 	
her information you want to share:					
ner information you want to share:				 	
ner information you want to share:					
ner information you want to share:					
ner information you want to share:				 	
ner information you want to share:				 	
ner information you want to share:				 	
ner information you want to share:				 	
ner information you want to share:				 	
her information you want to share:					
her information you want to share:					
her information you want to share:					
	ner informa	tion you want to sha	are:		



## **Professional Reference**

Student Name:	

Category	4	3	2	1	POINT TOTAL
Attendance	Regular attendance of classes or activities as scheduled at least 90% of the time	Consistent attendance of classes or activities as scheduled at least 80% of the time	Irregular Attendance Attends 70% of classes or activities	Ongoing Barriers Attends 60% or less of classes or activities	
Promptness	Regularly on time  Prompt for about 90% of classes or activities	Late to class or activity occasionally Prompt for about 80% of classes or activities	Late to classes or activities regularly Prompt for about 70% of classes or activities	Ongoing Barriers  60% or less of promptness for classes or activities	
Level of Engagement	Proactively contributes by offering ideas and asking questions more than once per class or activity	Proactively contributes by offering ideas and asking questions once per class or activity	Rarely contributes to class by offering ideas and asking questions	Never contributes to class by offering ideas and asking questions	
Listening Skills	Listens when others talk, incorporates or builds off ideas of others, and follows directions	Listens when others talk and follows directions	Student does not always listen, but follows up and is respectful to others	Student does not listen and interrupts others when talking	
Managing Stressors	Almost never displays disruptive behavior	Rarely displays disruptive behaviors	Occasionally displays disruptive behaviors	Almost always displays disruptive behaviors	
Preparation	Almost always is prepared for classes or activities	Usually prepared for classes or activities	Rarely prepared for classes or activities	Almost never prepared for classes or activities	
		Score Total			



### **Professional Reference**

Rate and explain participation in extracurricular activ	ities and/or community activities.
---	------------------------------------

Please be specific about the monthly hours for the last 12-months

Very Active 4	3	2	Not Active 1	

Rate and explain previous AND current participation in school or community work experiences.

Please be specific about how many hours worked per week

Very Active 4	3	2	Not Active 1	
ollege Readiness: Explain	why petioner is ready for	college.		

Please email to the Hospitality Foundations Program Coordinator on your campus:

New Richmond and Rice Lake Campuses: Heidi Diesterhaft

Program Coordinator/Accommodation Specialist

<u>Heidi.Diesterhaft@NorthwoodTech.edu</u> | 715.788.7142

Ashland and Superior Campuses:

Karen Mattson

Program Coordinator/Instructor

<u>Karen.Mattson@NorthwoodTech.edu</u> | 715.685.3069

800.243.9482

NorthwoodTech.edu/hospitality-foundations