

START COLLEGE NOW APPLICATION

WITC Student Number (Completed by WITC Team Member):

I. STUDENT INFORMATION
This section completed by student / parent

Student Name <i>First, Middle, Last</i>	Student's Birthdate <i>Mo./Day/Yr.</i>	Gender M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/>
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Parent/Guardian Name *First, Last*

Address *Street, City, State, Zip, County*

Student Phone <i>Area/No.</i>	Student Email	Social Security Number
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Parent/Guardian Phone <i>Area/No.</i>	Parent/Guardian Email	Highest Credential Earned by Either Parent
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High School Student Attends & Projected Graduation Year	School District/County/Municipality in Which Student Resides
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Technical College to Which You Are Applying to	Grade Student Will be in When Taking These Courses <input type="checkbox"/> 11 <input type="checkbox"/> 12	Number of College Credits Earned to Date
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Semester for which applying: Spring Fall Year 20____

					II. BOARD ACTION			
					<i>Completed by HS district</i>			
WITC Approval	Check if Alternate	Wisconsin Indianhead Technical College Course Name	Technical College Course Number	No. of College Credits	Comparable HS Course Offered?		Approved for HS Credit	No. of HS Credits
					Yes	No		
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

III. STUDENT & PARENT / GUARDIAN SIGNATURES
This section completed by student / parent

STUDENT SIGNATURE—IN SIGNING THIS DOCUMENT, I acknowledge the following:

- I understand and will comply with the assurances and conditions outlined in "Student/Parent Specific Responsibilities" and Subchapter 38.12 (14).
- I authorize the high school and technical college to share all course and grade information.

Student Signature Required ➤	Date Signed <i>Mo./Day/Yr.</i>
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PARENT/GUARDIAN SIGNATURE—Required if student is under 18.

- I understand and will comply with the assurances and conditions outlined in "Student/Parent Specific Responsibilities" and Subchapter 38.12 (14)
- I authorize the high school and college to share course and grade information.

Parent/Guardian Signature Required ➤	Date Signed <i>Mo./Day/Yr.</i>
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IV. STUDENT NAME <i>This section completed by student / parent</i>	
Student Name <i>First, Middle, Last</i>	Ethnicity: <i>Are you Hispanic or Latino?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No.

Racial Identity: *Your response is confidential and will not affect the admissions process.*

American Indian/Alaska Native
 Asian
 Black/African American
 Native Hawaiian/Pacific Islander
 White

V. HIGH SCHOOL BOARD APPROVAL <i>This section completed by district</i>	
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Named student is approved to enroll for courses marked "Approved" in Section II:

Yes No. *If no, indicate reason for denial:*

The School District will pay for ____ credits for the ____ semester.

The School District will assume responsibility for the following checked items:

Tuition
 Book(s)
 Course Syllabus
 Tools
 State Testing Fees

Check if student has a record of disciplinary issues.

Name of High School Board Approval Authority	Phone <i>Area/No.</i>
High School Board Approval Authority Signature ➤	Date Signed <i>Mo./Day/Yr.</i>

VI. TECHNICAL COLLEGE APPROVAL <i>This section completed by college</i>			
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Name of Course(s) in Which Student is Enrolled (Attach Enrollment Summary)	Course Code(s) / Number(s)	No. of College Credits	District Approved?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Eligible to enroll

I CERTIFY that the above-named student is eligible to attend the course(s) listed in Section VI and that all these courses are nonsectarian in content. The student will be notified of college admission policies/criteria and record disclosure provisions. The technical college agrees to provide the school district with grade information (and attendance information upon request).

Not eligible to enroll

I CERTIFY that the above-named student is not eligible to enroll in and/or attend the course(s) listed in Section VI. The student will be notified of the reasons for ineligibility.

Name of Technical College Representative and Title	Phone <i>Area/No.</i>	Email
Technical College Representative Signature ➤		Date Signed <i>Mo./Day/Yr.</i>

VI. APPEALS	
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Appeals of school board decision: A student may appeal a school board decision regarding awarding of high school credit or course comparability to the State Superintendent within 30 days of the board's decision.