



**2019-20 ADMISSIONS
APPLICATION**

Visit our new website at www.steelcentertech.com

Contact Information

Student: Last Name _____ First Name _____ Middle Initial _____

Address (Number/Street) _____ (City) _____ (Zip) _____

Birth Date ____/____/____
Month Day Year

Current Grade: 9 10 11 12

Resident School District _____

High School _____

**565 N. Lewis Run Road
Jefferson Hills, PA 15025
412.469.3200
Fax: 412.469.8346**

Parent: Name (Title) _____ (First) _____ (Last) _____

Home Phone (____) ____-____ Parent Work Phone (____) ____-____ Parent Cell Phone (____) ____-____

Email Address _____

Selection of Career Majors Select 3 programs of interest, 1 being your first choice, 2 your second, 3 your third.

- Automotive Careers**
- ____ Automotive Technology
 - ____ Collision Repair and Refinishing
 - ____ Diesel Technology

- Construction Careers**
- ____ Building Trades Maintenance
 - ____ Carpentry
 - ____ Electrical Construction
 - ____ Heating, Air Conditioning and Refrigeration

- Food Service Careers**
- ____ Baker/Pastry Chef
 - ____ Culinary Arts

- Computer/Technology Careers**
- ____ Advertising and Design
 - ____ Computer Technology

- Manufacturing Careers**
- ____ Welding

- Health/Human Services Careers**
- ____ Health/Medical Assistant
 - ____ Public Safety
 - ____ Cosmetology

SESSION: (for sending school counselor)

AM PM

Student's Signature: _____ Date _____

District Guidance Counselor's Signature: _____ Date _____

Parent/Guardian Signature: _____ Date _____

Permission is given for my child to apply to Steel Center for CTE.

