

APPLICATION FOR ADMISSIONS

Today's Date \_\_\_\_\_

Anticipated Start Date \_\_\_\_\_

Program of interest \_\_\_\_\_

Program for TN: \_\_\_\_\_ or KY: \_\_\_\_\_

Class Schedule: DAY \_\_\_\_\_ or NIGHT \_\_\_\_\_  
.....

Name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Last First Middle (Maiden)

Address: \_\_\_\_\_  
Street Apt # City State Zip

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security # \_\_\_\_\_

Education: High School Graduate \_\_\_\_\_ GED \_\_\_\_\_ Other \_\_\_\_\_

Any school attended other than High School: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse's Name \_\_\_\_\_ Number of children \_\_\_\_\_

Names and ages of all members of the Household.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

Place of employment: \_\_\_\_\_ Work Schedule \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency Name and Phone # \_\_\_\_\_

How did you hear about the school? \_\_\_\_\_

Will you receive benefits from Social Security? \_\_\_\_\_ Amount \_\_\_\_\_

AFDC? \_\_\_\_\_ Amount \_\_\_\_\_

Have you been convicted of a felony in the last (3) Three years or any misdemeanor involving moral turpitude within (1) one year. If you answer yes, then you may not test until you provide the proper documents to get clearance from the State Board.

If Yes, Please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Employment History: List your last two employers:

EMPLOYER	DATES	NATURE OF WORK	SALARY	REASON FOR LEAVING
Name:	From:		Start:	
Address:	To:		End:	
Supervisor:				
Name:	From:		Start:	
Address:	To:		End:	
Supervisor:				

Are you or spouse Military? \_\_\_\_\_  
 You must provide the following information.

You or Spouse Unit \_\_\_\_\_ Rank \_\_\_\_\_

Commander's Name: \_\_\_\_\_ Commanders Phone \_\_\_\_\_

Are you applying for Veteran's Benefits? \_\_\_\_\_ Please see additional required forms in the admissions packet.