

YORK COUNTY SCHOOL OF TECHNOLOGY

Part Time FLEX Student Application For 11th & 12 Grade

York Tech Use Only: Student ID: _____ Date Received: _____
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Completed application must be returned to your counselor by May 1, 2022.

Name: _____
Last First Middle

Current Grade Level (circle one): _____ Birthdate: ____/____/____

Address: _____
Street Number Street Name City State Zip Code

E-mail Address: _____

Primary Phone Number: _____ PA Secure ID No: _____

Current School: _____ School District: _____

Student lives with (select one):

Father/Caregiver: _____ Mother/Caregiver: _____

Relationship to student: _____ Relationship to student: _____

Cell Phone Number: _____ Cell Phone Number: _____

Please check here if parents have joint custody

Have you attended York Tech before? If yes, which school year? _____

Selection of Technical Program

Please choose one of the programs below by checking the program name below.

For Junior or Seniors

Meets 1:30-3 p.m.

- Intro to Automotive Technology
- Intro to Welding
- Nail Technology
- Mechatronics/Industrial Controls

Entrance Requirements

Students must:

- Receive passing grades in the four major subjects areas of English, Math, Science, and Social Studies
- Have 5 or less unexcused absences at the time of application (current school year)
- Participate in an interview conducted by a representative from York Tech which will include sending school counselor.
- Be able to schedule all courses for graduation (English or Social Studies may be taken online)
- Please see course description for any additional requirements for that program

Safe Schools Act Statement

Pennsylvania School Code 13-304-A states in part "Prior to admission to any school entity, the parent, guardian, or other person having control or change of a student shall, upon registration provide a sworn statement of affirmation stating whether the pupil was previously or is presently suspended or expelled from any public or private school of this Commonwealth or any other state for an action or offense involving a weapon, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property."

___ I hereby swear or affirm that my child was not suspended or expelled and is not presently suspended or expelled from any public or private school in the Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or willful infliction of injury to another person.

___ My child is/was previously suspended [] or expelled [] from a public or private school in the Commonwealth or another state for an act or offense involving weapons, alcohol or drugs, or willful infliction of injury to another person.

Grade: _____ Reason:

Agreement between Parent/Guardian and York County School of Technology

Parent/Guardian signature below indicates all of the following:

1. My child has my permission to apply to York County School of Technology and all information provided on this application is correct to the best of my knowledge.
2. I approve of my child's records being released to York County School of Technology upon application to York Tech.
3. My child will abide by all YCST rules & regulations.

Student Signature

Parent/Guardian Signature

The York County School of Technology shall not discriminate against any student, employee or applicant for admission or employment, or in its activities or programs, on the basis of race, color, religious creed, ancestry, union membership, age, gender, sexual orientation, gender expression or identity, national origin, AIDS or HIV status, or disability. Inquiries may be directed to Mr. Gerry Mentz, Director of Student Services, at 2179 S. Queen Street; York, Pennsylvania 17402; or 717-741-0820 x5108. Email

GMentz@ytech.edu.

La Escuela de Tecnología del Condado de York no discriminará a ningún estudiante, empleado o solicitante de admisión o empleo, ni en sus actividades o programas, por raza, color, credo religioso, ascendencia, afiliación sindical, edad, sexo, orientación sexual, la expresión o la identidad de género, el origen nacional, el SIDA o la condición de VIH, o la discapacidad. Las preguntas pueden dirigirse al Sr. Gerry Mentz, Director de Servicios Estudiantiles, al 2179 S. Queen Street; York, Pennsylvania 17402; o 717-741-0820 x5108. Correo electrónico

GMentz@ytech.edu.

Sending School Counselor should complete this section

Please include the following most recent documents at the time of application:

- Attendance at time of application: Date_____ Unexcused_____
- Student's 9th Grade Entry Date _____
- Current School Transcript
- Student Biographical Information
- Copy of Immunization Records
- List of courses needed to graduate (For Full-time Programs only)

Counselor Comments:

Counselor Signature _____

****Counselors - Please Note****

For a **FULL-TIME** application to be considered complete, please forward the following student documents at the end of **Semester 1**:

- Report Card
- Discipline Report
- Attendance Report