

School Year applying/updating: _____ Current Grade _____

Silver Creek Career Academy Program (CAP) Application

Name _____
(Last) (First) (Middle)

Address _____ Home phone _____

Cell phone _____

Email: _____ Student ID # _____

IRP Teacher _____ Grade _____

Career Academy Program (CAP) _____

(Business & Finance / Cadet Teaching/ Communications & Journalism / Performing Arts/ PLTW Bio Med /
PLTW: Computer Science / PLTW Pre Engineering/)

Courses taken in your field of study, events attended, offices held

FR: _____

SOPH: _____

JR: _____

SR: _____

Work experience: _____

Volunteer experience: _____

Extra-curricular activities: _____

Honors courses taken/taking: _____

Parent work information:

Father's name _____ Mother's name _____

Employer _____ Employer _____

Position _____ Position _____

Phone _____ Phone _____

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List adults you know that work in the Career Academy Program area who may be willing to help (as speakers, arranging a field trip to their workplace, ...)

NAME	COMPANY	PHONE	HOW THEY CAN HELP
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What skills do you have that would help you work in the Career Academy Program (CAP) industry?

Write a brief paragraph (6-10 sentences) describing yourself and your interest in the Career Academy Program (CAP) you have chosen.

3 Teachers/administrators signatures for recommendation into the program:

By signing below, I understand that if I am accepted into this program, I will be committed to completing all of the necessary Academy courses and to participate in a summer internship program between my Junior and Senior year.

Further, by signing below, I give permission for Silver Creek High School to release my unofficial transcript of grades and attendance to the Career Academy Program team for use in selection to the selected Career Academy Program area.

(signature of student)

(signature of parent)

(date)

(date)