

**MOBERLY AREA TECHNICAL CENTER**  
**2019-2020 ENROLLMENT APPLICATION**  
(please fill out completely to expedite processing)

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle name: \_\_\_\_\_  
(sometimes we get students with the same first and last names)

Home High School: \_\_\_\_\_ current grade level: \_\_\_\_\_

Street/PO Box: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Parent e-mail: \_\_\_\_\_  
(parent portal account information will be emailed to this address)

Parent/Guardian #1 name: \_\_\_\_\_ live with? yes no  
mother father step-mother step-father other: \_\_\_\_\_  
work phone number: \_\_\_\_\_ cell phone number: \_\_\_\_\_

Parent/Guardian #2 name: \_\_\_\_\_ live with? yes no  
mother father step-mother step-father other: \_\_\_\_\_  
work phone number: \_\_\_\_\_ cell phone number: \_\_\_\_\_

Emergency contact name: \_\_\_\_\_ phone number: \_\_\_\_\_  
relationship: \_\_\_\_\_ allow to leave with student? yes no

**Program choice:** (Students submitting late applications will be put on a waiting list for programs and will be processed when a slot becomes available. Check with your school counselor for exact due date.)

- |   |  |
|---|--|
| _____ Agriculture (1-2 hour)                  | _____ Architectural & Engineering Design(2-3 hour) |
| _____ Automotive Technology(3 hour)           | _____ Electronics & Robotics Technology(2-3 hour)  |
| _____ Building Technology(3 hour)             | _____ Machine Tool Technology(2-3 hour)            |
| _____ Business Technology(1 hour)             | _____ Marketing(1 hour)                            |
| _____ Collision Repair Technology(3 hour)     | <b>Medical Technology:(1-2 hour)</b>               |
| _____ Computer Information Technology(3 hour) | _____ Medical Anatomy & Pathophysiology(2 hour)    |
|   | _____ Pre-Med(2 hour)                              |
|   | _____ Welding Technology(2-3 hour)                 |

\_\_\_\_\_ I would like to mix and match classes from the programs marked above (can only be done with 1 and 2 hour courses).  
Course descriptions are available from your guidance counselor or at <http://www.moberly.k12.mo.us/> under the MATC tab.

**Release of Information:** The above information is considered directory information and may be released for purposes of recognizing student achievement and participation in curricular and extra curricular activities. Any student who does not want his/her name released for such purposes should contact the Director's office concerning his/her request. **Compliance Statement:** The Moberly Public Schools does not discriminate on the basis of race, color, national origin, sex, age, or handicap in admissions or access to, or treatment of employment in its programs and activities. If you have any questions regarding compliance with Title VI, Title IX, or section 504, please contact the Superintendent of Schools or the Director of Special Education, 926 KWIX Road, Moberly, MO 65270, telephone number 660-269-2600. 1018

**To be completed by guidance counselor.**

Please check all that apply. If not checked, it will be assumed that the situation does not apply.

- IEP--case manager must send a **copy of current IEP**
- 504 PLAN--case manager must send a **copy of current 504 plan**
- medical condition or accommodation requires submission of an **Individualized Healthcare Action Plan**
- history of physical violence or threat of physical violence (a **copy of student's discipline history** must be reviewed by MATC director, before application can be processed)
- behavior management plan (case manager must send a **copy of current behavior management plan** before application can be processed)
- Computer Information Technology (CIT) applicants only:** this student has been disciplined for a computer violation during the current school year?
- CIT, Business & Technology applicants only:** this student has successfully completed a minimum of 1 year of instruction in Microsoft Office Suite? (Not required for all Business classes, see course desc.)
- student needs to earn **embedded credit in math** to graduate
- student needs to earn **embedded credit in communication arts** to graduate

Please circle **ONE** in **each** category:

- |        |                        |   |
|--------|------------------------|---|
| male   | Hispanic or Latino     | White                                     |
| female | Not Hispanic or Latino | American Indian or Alaska Native          |
|        |                        | Asian                                     |
|        |                        | Black or African American                 |
|        |                        | Native Hawaiian or Other Pacific Islander |

state id number: \_\_\_\_\_

birth date(mm/dd/yy): \_\_\_\_ - \_\_\_\_ - \_\_\_\_

current year attendance rate: \_\_\_\_\_

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guidance counselor signature

date

If you have any questions, please contact Sharon Johanning, Student Services Coordinator at (660)269-2690 or sharonjohanning@moberlyspartans.org.