



NORTHWEST TECHNICAL SCHOOL

APPLICATION FOR **SECONDARY** ADMISSION

Return completed application to Northwest Technical School

GENERAL INFORMATION

PROGRAM APPLYING FOR: _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____ Male Female

LEGAL NAME _____
Last First Middle School Email Address

PERMANENT LEGAL ADDRESS (VERIFICATION MAY BE REQUESTED)

Address _____ City _____ State _____ Zip _____ County _____

HIGH SCHOOL ATTENDING _____ GRADUATION YEAR _____

PARENT INFORMATION

Father's name _____ Address _____ City _____ State Zip _____ County _____

PHONE NUMBER HOME _____ WORK _____ EMAIL _____

Mother's name _____ Address _____ City _____ State Zip _____ County _____

PHONE NUMBER HOME _____ WORK _____ EMAIL _____

IN CASE OF EMERGENCY (other than parent) _____
Name Relationship Phone

BACKGROUND

White Hispanic American Indian/Alaskan Native Multi-racial
Black/African American Asian Native Hawaiian/Other Pacific Islander

Please list any accommodations that you believe may be required as the result of a disability of the student.

Family Physician _____ Address _____

Physician Phone # _____

MEDICAL INSURANCE INFORMATION

To be enrolled at Northwest Technical School, students must have accident insurance coverage. Please indicate how this is provided and list the insurance policy.

Check One: I have purchased school accident insurance.
Student is covered by a family hospitalization insurance.

Company's Name _____

Policy # _____

NONDISCRIMINATION CLAUSE

All services provided by the Northwest Technical School are available without regard to race, sex, creed, national origin, color, or disability conditions. Concerns regarding discrimination should be addressed to the Directors' Office – 660.562.3022.

Northwest Technical School

1515 South Munn Street
Maryville, MO 64468
jackson@maryviller2.com