

POSTGRADUATE APPLICATION

First Name: _____ **Middle Name:** _____ **Last Name:** _____

Address: _____ **Town/Zip Code** _____ **Home/Cell #:** _____

High School Attended: _____ **Last Year Attended:** _____ **YOG:** _____

College Attended (if applicable): _____ **Last Year Attended:** _____ **YOG:** _____

Most Recent Employer: _____ **Address:** _____

Position: _____ **Supervisors Name:** _____ **Telephone:** _____

Dates of Employment: _____ **Reason for Leaving:** _____

Have you ever been enrolled at Keefe Technical School? _____ **Yes** _____ **No**

Post Graduate students are admitted to Keefe Technical School on a space-available basis.

POSTGRADUATE AREAS OF INTEREST:

_____ Automotive Technology	_____ Graphic Design
_____ Business Technology	_____ Horticulture & Landscaping
_____ Carpentry	_____ Information Systems
_____ Cosmetology	_____ Metals Technology
_____ Culinary Arts	_____ Plumbing
_____ Electrical	

Voluntary Equal Educational Opportunity Section

Completion of the following information is strictly voluntary and will not be used as a condition of admission. This information is used for Equal Educational Opportunity statistics only:

Applicant Gender: _____ Male _____ Female Language Spoken at home: _____

Applicant has a disability: _____ Yes _____ No Limited English Proficient: _____ Yes _____ No

Accommodations needed during the application process? _____ Yes _____ No If yes, please describe:

Race: (Please choose all that apply: _____ Asian _____ Black or African American _____ White
_____ American Indian or Alaska Native _____ Native Hawaiian or Other Pacific Islander

Ethnicity: Please choose one: _____ Hispanic or Latino _____ Not Hispanic or Latino

Single Parent: _____ Yes _____ No Displaced Homemaker: _____ Yes _____ No

Economically Disadvantaged: _____ Yes _____ No

Signature Section

The undersigned applicant gives permission to release school records including complete transcript.

Signature: _____ **Date:** _____

