

ATLANTA TECHNICAL COLLEGE

Move On When Ready

APPLICATION PACKET

2015-2016

PLEASE NOTE:

Qualifying test scores must be submitted prior to application packet acceptance.

ACCEL

ACT - 20 Composite OR
SAT - 450 Verbal, 430 Math OR
ASSET - 42 Writing, 42 Reading, 35 Math OR
COMPASS - 60 English, 79 Reading, 26 Math

Dual/Joint

ACT - 18 Composite OR
SAT - 410 verbal 410 math OR
ASSET - 38 Writing, 38 Reading, 35 Math OR
COMPASS - 38 English, 70 Reading, 26 Math

Interested applicants without test scores must contact hsadmissions@atlantatech.edu to sit for the Compass Placement Test.

Juli K. Gilyard
High School Initiatives Coordinator
Office C1109E
404.225.4427
404.225.4687 fax
hsadmissions@atlantatech.edu

Move On When Ready – Dual Enrollment Program

Student Disclaimer Form

I request permission to participate in the Dual Enrollment program at Atlanta Technical College. I have received the counseling services concerning participation in a high school program receiving college credit, including the program's guidelines and the student/parent responsibilities. My parents/guardians and I clearly understand what is expected of me to be able to enroll and to continue my participation in this program.

All expenses not covered, including tuition, fees, books, meals, lodging, and transportation, will be the student/parent/guardian responsibility.

I also understand that participating students must be ninth through twelfth graders and must meet all the college's eligibility requirements for participation (for example, must meet the minimum scores on the college's placement exam or have eligible ACT/SAT scores). If I am selected for provisional enrollment, I understand that I must meet the minimum score on the college's placement exam or have eligible ACT/SAT scores before college credit and program completion will be awarded.

I understand Atlanta Technical College is responsible for honoring college credit only. It is up to the receiving high school and high school guidance counselor to verify and confirm that high school credits/courses are in compliance with high school courses and graduation requirements. I understand it is my responsibility to obtain a college schedule and to notify my high school of my college acceptance. I must also notify the high school if my enrollment status at the college changes.

I understand I must make a "C" or better in my ATC courses in order to take the next ATC level course. A "D" may constitute a passing grade at the high school level; however, I understand that a "D" or "F" will NOT allow me to take the next course level at the college.

Student Name – Please Print

Student Signature

Date

Parent/Guardian Signature

Date

ATC High School Initiatives Coordinator

Date

**ATLANTA TECHNICAL COLLEGE
CONSENT TO DISCLOSE INFORMATION
(FERPA Release Form)**

Consent to Disclose Information

To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, an institution must obtain signed consent before it can release student information to a third party.

I, _____, ATC Student ID# _____
hereby authorize the Atlanta Technical College Registrar's Office to release information pertaining to my admission status and paperwork, class schedule, grades, enrollment status, financial aid and any other information regarding my educational records to the following individuals:

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

I understand that all information released is specifically indicated and will be released only to the entities/individuals named on this form. All other information remains confidential. I will not be notified when information is released to the above individuals. I acknowledge that this consent is valid until I have completed my current program or until I revoke this consent in writing.

Student Signature

Date

OFFICIAL USE ONLY

Received by: _____

Date: _____

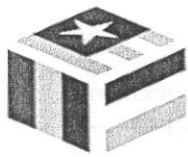
Entered Comments Into Banner:

_____ SPACMNT By: _____

Date: _____

_____ SGASTDN By: _____

Date: _____



ATLANTA TECHNICAL COLLEGE

HIGH SCHOOL APPLICATION FOR ADMISSION

Please complete all sections. Incomplete applications will not be processed.

GENERAL INFORMATION

Last Name:		First Name:	M.I.:
Current Street Address:			
City:	State:	ZIP Code:	
County of Residency:	Date of Birth:	SSN:	
Email:			
Home Phone:		Cell Phone:	
Parent/Guardian Name:		Parent/Guardian Email:	

STATISTICAL INFORMATION

The following information is used for statistical purposes only and will not be used in determining admission:

Are you Hispanic/Latino? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please answer next question
Race: American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Other <input type="checkbox"/> _____
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>

PROGRAM INFORMATION

New Student <input type="checkbox"/> Re-enroll <input type="checkbox"/>	Program of Study:
Choose One: Move On When Ready <input type="checkbox"/> Joint Enrollment <input type="checkbox"/>	
Choose One: Degree <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate <input type="checkbox"/>	
Term: Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/>	

STUDENT STATUS

Current High School:	Current Grade:
School District:	Anticipated Graduation Date: (month/year)

EMERGENCY CONTACT INFORMATION

Name:	
Relationship:	Telephone Number:

OFFICIAL USE ONLY

Student ID:	Enrollment Status: Provisional <input type="checkbox"/> Regular <input type="checkbox"/>	Staff initials:
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Student Authorization

I am applying for Move on When Ready /Joint Enrollment at ATC and understand I must meet all college admissions requirements for this program. I certify the foregoing information in this application is true and correct. I understand misrepresentation or omission of information may be sufficient cause for rejection or dismissal.

I understand that I may be financially responsible for tuition, books, fees, and other supplies that are not covered by state or local funding.

By signing and submitting this application and upon my admission to Atlanta Technical College, I understand that my name, quotations, and photographic likeness may be used in all forms of media for advertising, trade, and any other lawful purposes on behalf of Atlanta Technical College or the Technical College System of Georgia and that I will not receive now or in the future compensation for this usage. I also understand that my name, quotations, and photographic likeness may be gathered from and posted to ATC's social media sites and web site and can be downloaded by any computer user on or off campus.

All materials submitted with this application become the property of Atlanta Technical College and will not be returned to the applicant.

Signature of Student: _____ Date: _____

Parent/Guardian Authorization

As the parent/guardian of the student listed above, I grant permission for this student to participate in the MOWR/Joint Enrollment program at ATC. I understand the rules and regulations of my child's selected program.

I understand that my child may be financially responsible for tuition, books, fees, and other supplies that are not covered by state or local funding. I am responsible for paying for books and fees not covered and for providing transportation.

Further, I grant permission for usage of my student's name, quotations, and photographic likeness to be used in all forms of media for advertising, trade, and any other lawful purposes on behalf of Atlanta Technical College or the Technical College System of Georgia and that he/she will not receive now or in the future compensation for this usage. I also understand that their name, quotations, and photographic likeness may be gathered from and posted to ATC's social media sites and web site and can be downloaded by any computer user on or off campus.

Signature of Parent or Guardian: _____ Date: _____

DISCLAIMER

As set forth in its catalog, Atlanta Technical College does not discriminate on the basis of race, color, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, veteran status, or citizen status (except in those circumstances permitted or mandated by law). For further information regarding these laws (Title VI, IX and Section 504/ADA), contact Sylvie Moses, Special Needs & Equity Coordinator, Atlanta Technical College, Cleveland Dennard Building, Student Affairs Division, 1560 Metropolitan Parkway, SW, Atlanta, GA 30310. Phone: 404.225.4434 Email: smoses@atlantatech.edu.

ATLANTA TECHNICAL COLLEGE IS A UNIT OF THE TECHNICAL COLLEGE SYSTEM OF GEORGIA

Pursuant to O.C.G.A. 16-10-20, it is a felony to make a false statement on any state document. In addition, making a false statement on this application may result in your dismissal from the college.