



Class No. _____
Date _____

APPLICATION FOR ADMISSION

Please print, and provide all the information requested completely and accurately. This information will remain strictly confidential. The Application for Admission will be used to better understand each students needs, it is not a job application.

Last Name _____ **First Name** _____ **Date** _____

Address (street, city, zip) _____

Email address _____ **Social Security Number** _____

Phone (mobile) _____ **(home)** _____ **Date of Birth** _____

Marital Status _____ **Number of Children** _____

Emergency Contact _____ **(relationship)** _____ **Phone Number** _____

Served in the Armed Forces? Yes _____ No _____

EDUCATION **School Name** **Dates Attended**

High School

Trade School

College/Other

WORK HISTORY

List current or most recent employer first. Please list last seven (7) years.

Dates	Name of Employer	Position	Contact Name and Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

To ensure the school provides training as outlined in the Mission, Vision and Value statements, we ask that you please provide the following information.

Where are you currently staying? _____

Are you involved in any type of drug or alcohol rehabilitation program? _____

Have you ever been arrested? YES NO

If YES,	Charges	Date

Name and phone number of Social Worker, Case Manager, or Parole Officer _____

Are you currently under a doctor's care? _____ Are you currently taking any prescription or other type of medicine? _____

If YES, please list _____

Do you experience any side effects such as drowsiness, etc.? _____

Do you have any barriers to standing or lifting up to 50 lbs. in a kitchen environment? _____

What is your goal upon graduation from CCSC? _____

I understand this application is part of the admission process for the school and does not guarantee my acceptance in the program. I have answered all questions truthfully. I understand that false information or omission of information may result in dismissal from the program, regardless of when it is discovered.

Signature _____ Date _____

FOR OFFICE USE ONLY			
Interview by _____	Date _____		
Evaluation Dates _____	Completed	yes	no
Accepted for class # _____	Date _____		

Community Culinary School