



Career and College Promise Application

Biographical Information		
Last Name	First Name	Middle
Social Security Number (Used for Student ID Purpose Only) ____-__-____	Date of Birth / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address	Phone Number	
City	State	Zip Code
Ethnicity: Please Select One (Optional) <input type="checkbox"/> Non-Hispanic/Latino <input type="checkbox"/> Hispanic/Latino	Race: Please Select One (Optional) <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Other _____	

High School & CCP Information		
High School	Current Grade Level: <input type="checkbox"/> 11 <input type="checkbox"/> 12	Expected Graduation Date Month _____ Year _____
Career and College Pathway: Select One		
College Transfer <input type="checkbox"/> Associates in Art <input type="checkbox"/> Associates in Science	<input type="checkbox"/> Collision Repair & Refinishing <input type="checkbox"/> Computer-Integrated Technology <input type="checkbox"/> Cosmetology <input type="checkbox"/> Criminal Justice <input type="checkbox"/> Early Childhood Education <input type="checkbox"/> Electrical Systems Technology <input type="checkbox"/> Electronics Engineering Technology <input type="checkbox"/> EMS <input type="checkbox"/> Entrepreneurship <input type="checkbox"/> Esthetics <input type="checkbox"/> Fire Protection Technology	<input type="checkbox"/> Industrial Management Technology <input type="checkbox"/> Information Technology <input type="checkbox"/> Manicuring/Nail Technology <input type="checkbox"/> Mechanical Drafting Technology <input type="checkbox"/> Medical Office Administration <input type="checkbox"/> Mission Critical Operations <input type="checkbox"/> Nurse Aide <input type="checkbox"/> Plumbing <input type="checkbox"/> School Age Education <input type="checkbox"/> Welding
Career & Technical Education Pathways		
<input type="checkbox"/> AC, Heating, Refrigeration <input type="checkbox"/> Automation Engineering Technology <input type="checkbox"/> Biotechnology Allied Health <input type="checkbox"/> Broadcasting & Production Technology <input type="checkbox"/> Business Administration <input type="checkbox"/> Carpentry		

I certify the information on this application is accurate. I agree to abide by the rules, policies, and regulations of CCC. CCC has my permission to release pertinent information on this form to appropriate college staff and other authorized individuals and agencies. In the event of emergency or illness, I give my permission for CCC to seek appropriate medical assistance. I agree as a high school student, regardless of age, that CCC may release information regarding my enrollment, academic progress, discipline matters or attendance to my high school administration.

Student Signature

Date

**Tuition fees are waived for CCP students, however textbooks costs are the student's responsibility. Textbook costs are available by course on our website: Clevelandcc.edu >> Services for Students >> College Store.