



Enrollment Form 2018-19 School Year

Print all information neatly. Return this completed application to your Guidance Counselor.

Enrollment into a program will be determined by the home high school and the J. Everett Light administrative staff.

Student Name _____ STN# (Required) _____
(last) (first) (middle) (student testing number)

Home Address _____ Social Security Number _____
(street number & name) (city) (zip code)

High School _____ Current Grade _____ Gender _____ Birth Date ____/____/____

Parent/Guardian Name(s) _____ Parent/Guardian Email _____

Parent/Guardian Primary Phone # _____ Parent/Guardian Second Phone # _____ Emergency Contact Name _____
Emergency Contact Phone # _____

Check the class you are requesting or Identify 1st, 2nd, & 3rd choice:

First Year Class

- _____ Advanced Manufacturing Technology and Engineering (3hr)
- _____ Advanced Manufacturing Technology and Engineering (2 hr)
- _____ Animation & Film Production (2 hr)
- _____ Automotive Collision Repair & Refinishing (3hr)
- _____ Automotive Collision Repair & Refinishing (2 hr)
- _____ Automotive Maintenance/Detailing (3 hr)
- _____ Automotive Maintenance/Detailing (2 hr)
- _____ Automotive Service Technology (3 hr)
- _____ Cosmetology (3 credits per semester, 4hr class) Choose Location Below:
 - _____ J. Everett Light Career Center
 - _____ Freestyle
 - _____ Kaye's
- _____ Culinary Arts Careers (3 hr)
- _____ Dental Careers (3 hr)
- _____ Education Careers (3 hr)
- _____ Emergency Medical Technician (3 hr, full year option)*
- _____ EMR, First Responder (3hr, 1st semester option only)
- _____ Graphic & Web Design (3 hr)
- _____ Graphic & Web Design (2 hr)
- _____ Health Careers Exploration (2 hr)*
- _____ Health Careers, CNA Prep (3hr)*
- _____ Law Enforcement (3 hr)
- _____ Media Arts Production (2 hr)
- _____ Medical Assisting (3 hr) note: personal transportation required
- _____ Medical Assisting (2 hr) simulated lab experience
- _____ Music/ Sound Production (2 hr)
- _____ Veterinary Assisting (3 hr) note: personal transportation required
- _____ Welding (3 hr)
- _____ Welding (2 hr)
- _____ Work Based Learning (3hr) note: personal transportation required
PM class time preferred

Second Year Class

**JELCC teacher signature
Required for enrollment in
2nd year classes**

_____ (required)

- _____ Advanced Manufacturing Technology and Engineering (3 hr)
- _____ Advanced Manufacturing Technology and Engineering (2 hr)
- _____ Animation & Film Production (2 hr)
- _____ Automotive Collision Repair & Refinishing (3 hr)
- _____ Automotive Collision Repair & Refinishing (2 hr)
- _____ Automotive Maintenance/Detailing (3 hr)
- _____ Automotive Maintenance/Detailing (2 hr)
- _____ Automotive Service Technology (3 hr)
- _____ Cosmetology (3 credits per semester, 4 hr) Choose Location Below:
 - _____ J. Everett Light Career Center
 - _____ Freestyle
 - _____ Kaye's
- _____ Culinary Arts Careers (3 hr)
- _____ Dental Careers (3 hr) note: personal transportation required
- _____ Education Careers (3 hr)
- _____ Graphic & Web Design (3 hr)
- _____ Graphic & Web Design (2 hr)
- _____ Law Enforcement (3 hr)
- _____ Media Arts Production (2 hr)
- _____ Music/ Sound Production (2 hr)
- _____ Veterinary Assisting (3 hr) note: personal transportation required
- _____ Welding (3 hr)
- _____ Welding (2 hr)
- _____ Work Based Learning (3hr) note: personal transportation required
PM class time preferred

Signatures below also grant permission for the home school to provide confidential records to J. Everett Light to be used to assist the student with his/her educational needs. Permission is also granted for J. Everett Light to take and use photographs and video for promotional purposes. It is also understood that the J. Everett Light Career Center does **not** carry student accident and hospitalization insurance. It is the policy of the J. Everett Light Career Center not to discriminate on the basis of sex, race, or disability in the educational programs or activities which it operates or in employment therein or admission thereto.

Student Signature _____ Date _____ Parent Signature _____ Date _____

H.S. Counselor Signature _____ Date _____

H.S. Counselor Use Only

Class time preferred: ☐ AM ☐ PM Check if appropriate: ☐ 504 on file ☐ ESL ☐ IEP on file

*Check offsite location (if applicable) ☐ Fishers High School ☐ Hamilton Southeastern High School ☐ Ivy Tech (CNA)

Enroll in Study Hall (2 hr sending school students only) ☐ Yes ☐ No