

Short Course Training Application

A \$25 non-refundable application fee is required for all applications.

Phone: 1-800-478-5389 FAX: 1-907-224-4400



Alaska's Institute of Technology

Personal Information (Please Print Clearly)			
Last Name _____	First Name _____	M.I. _____	Social Security Number (required) _____
Mailing Address _____	City _____	State _____	Zip Code _____
Date of Birth _____	Home Phone Number _____	Cell Phone Number _____	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Financial Responsibility		Training Choices	
<input type="checkbox"/> Self <input type="checkbox"/> Employer <input type="checkbox"/> Other <u>EMPLOYMENT INFORMATION:</u> Occupation _____ Company _____ Company Address _____ City _____ State _____ Zip Code _____ (_____) _____ (_____) _____ Company Phone Number _____ Company FAX Number _____ Supervisor's Name _____		1.) _____ Enrollment Date: _____ 2.) _____ Enrollment Date: _____ 3.) _____ Enrollment Date: _____	
Housing			
Please indicate housing preference: <input type="checkbox"/> Dormitory - \$25 per day (meals may be purchased for \$6.50 per meal) <input type="checkbox"/> Off Campus			
Emergency Notification			
Name _____	Relationship _____	Home Phone (_____) _____	Cell Phone (_____) _____
Education	Heard About AVTEC?	Ethnicity statistical information is voluntary	
High School Diploma? _____	<input type="checkbox"/> Internet	<input type="checkbox"/> Nonresident Alien	
GED Diploma? _____	<input type="checkbox"/> Newspaper Ad	<input type="checkbox"/> Race and Ethnicity Unknown	
Highest Grade? _____	<input type="checkbox"/> Friends/Family	<input type="checkbox"/> Hispanic of Any Race	
Previous AVTEC Student? _____	<input type="checkbox"/> Toured AVTEC	If non-Hispanic, complete below	
How many years of college or technical training completed? _____	<input type="checkbox"/> Radio or TV Ad	<input type="checkbox"/> American Indian or Alaska Native	
	<input type="checkbox"/> H. S. Counselor/Teacher	<input type="checkbox"/> Asian	
	<input type="checkbox"/> Direct-Mail Flyer	<input type="checkbox"/> Black or African American	
	<input type="checkbox"/> Met AVTEC Rep at Job Fair	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	
	<input type="checkbox"/> Agency Referral	<input type="checkbox"/> White	
	<input type="checkbox"/> Alumni Referral	<input type="checkbox"/> Two or more races	
	<input type="checkbox"/> Public Transportation		
	<input type="checkbox"/> Movie Ad		
	<input type="checkbox"/> Other _____		
Signature			
Signature _____		Date _____	