Return to:
John Marshall Counseling Office
Due Date:
March 13, 2020

STUDENT APPLICATION FORM
JOHN MARSHALL HIGH SCHOOL

Name _____ **Grade** _____

WVEIS Number _____ **High School** _____

Address _____

City _____ **State** _____ **Zip** _____

Phone # _____ **Alternate Number** _____

Best Number to Reach Parent/Guardian _____

Blocked Programs Offered

AUTO COLLISION REPAIR – AUTO TECHNOLOGY – BROADCASTING COMMUNICATIONS TECHNOLOGY – CAREERS IN EDUCATION – COMPUTER-AIDED DRAFTING – COMPUTER IT REPAIR/NETWORKING – MACHINE & TOOL TECHNOLOGY – PROSTART – THERAPEUTIC SERVICES – WELDING TECH.

Indicate in Which Programs You Wish to Enroll (Please List Your Top 2 Choices)

You will only be selected for one Blocked Program.

Choice 1: _____ **Choice 2:** _____

Non-Blocked Programs Offered

ACCOUNTING – BUSINESS – CONSTRUCTION – HOME MECHANICS – MARKETING – PLANT SYSTEMS

Choice 1: _____ **Choice 2:** _____

You may select both blocked and non-blocked programs if you wish, you are not required to choose a program from each type.

What are your plans after high school? _____

Reference: Name _____ **Phone** _____
(Someone Not Related to You)

Name _____ **Phone** _____
(Someone Not Related to You)

Student Signature _____ **Date** _____

Non-Discrimination: This Company prohibits discrimination against or harassment of any person employed by or seeking employment with the CTE program because of race, creed, religion, or national origin or because of age, physical or mental disability, or sex.

(For School Use Only)

Student GPA _____ **Days Absent in Current Year** _____ **Number of Failed Classes** _____