



## Youth Pre-Apprenticeship Program Application

Email completed application to Leah Jones at [jonesL@octech.edu](mailto:jonesL@octech.edu)

### PERSONAL INFORMATION - To be completed by student (Please Print CLEARLY):

Name \_\_\_\_\_  
(First) (Middle) (Last)

Address \_\_\_\_\_  
(Street, Apt. No) (City, State) (Zip)

Student Phone \_\_\_\_\_ Student Personal Email \_\_\_\_\_

High School \_\_\_\_\_ Current Grade \_\_\_\_\_

Expected Date of High School Graduation \_\_\_\_\_  
(Month, Year)

### Check the apprenticeship in which you are interested.

- |  |  |
|--|--|
| <input type="checkbox"/> Automotive        | <input type="checkbox"/> Emergency Medical Technician                    |
| <input type="checkbox"/> Welding           | <input type="checkbox"/> Patient Care Technician/Certified Nursing Asst. |
| <input type="checkbox"/> Truck Driving     | <input type="checkbox"/> Medical Assisting                               |
| <input type="checkbox"/> PLTW/Mechatronics |  |

**Eligibility Requirements:** Students from area high schools must be enrolled in one of the Early College Pathways listed above to be eligible for scholarship funds. In order to be eligible for scholarship funds in subsequent semesters, students must maintain a 2.0 College GPA. Youth Pre-Apprenticeship students who fail a required course will be responsible for the cost of retaking it, and failing grades may jeopardize their continuation in the program and/or their eligibility to receive Lottery Tuition Assistance.

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

School Counselor Signature: \_\_\_\_\_

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