Ohio Technical Center Plus (OTC+)

WCSCC REFERRAL FORM

Students must meet all requirements of program enrollment to be accepted as an OTC+ student. Once accepted the student is considered enrolled in a post-secondary program—they will be held to the standards of technical training in preparation for employment.

STUDENT INFORMATION

NAME _____

PHONE NUMBER _____ EMAIL _____

ADDRESS _____

_____

YEAR OF ENROLLMENT (circle) junior senior

PROGRAM OF INTEREST (circle) HVAC Fast-Track Welding
Nurse Aide Phlebotomy

GPA (to date) _____

On track to graduate (circle) yes no

HOME SCHOOL DISTRICT _____

SCHOOL COUNSELOR NAME _____

COUNSELOR PHONE NUMBER _____

COUNSELOR EMAIL _____

PARENT INFORMATION

NAME _____

PHONE NUMBER _____

Parents, please initial the following statements:

_____ The student and parent/guardian have been advised that this program will have adult students enrolled alongside the students in OTC+

_____ The student and parent/guardian have considered the emotional and social transition.

_____ The student and parent/guardian have considered the impact on time management and organizational skills need to succeed in this program.

_____ Parent Signature

_____ School Counselor Signature