



7655 State Route 703, Celina, OH 45822 • Phone: (419) 586-7060 Fax: (419) 586-9503
Marcia Helentjaris, Adult Education Coordinator

ADULT EDUCATION APPLICATION FOR ENROLLMENT

Tri Star Career Compact reserves the right to cancel any class lacking minimum enrollment.

* NOTE: Individuals will be considered registered once payment and application is received. *

PLEASE PRINT CLEARLY:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Date of Birth: ____/____/____

Sex (circle one): M F

Cell Phone: _____

Email: _____

High School: _____

Are you a high school graduate? ____ YES ____ NO

Highest Grade Completed: _____

Are you currently in a Tri Star class? ____ YES ____ NO

If yes, what program? _____

Race (Check all that apply)

____ American Indian or Alaskan Native ____ Non-resident Alien

____ Asian or Pacific Islander ____ Unknown

____ Black, Non-Hispanic ____ White, Non-Hispanic

____ Hispanic

Currently Employed? ____ YES ____ NO

Employer's Name: _____

Description of current job: _____

Year Started Current Job: _____

Select Course of Interest:

____ Computer Basics Suite

____ FANUC Robotics

____ Forklift Training

____ Machining/CNC

____ ServSafe

____ Welding I

* E-mail addresses will only be used for sending Tri Star related notices and information.

NOTE: Tri Star Career Compact admits students without regard to sex, color, creed, religion, national origin, or handicapped condition, but may limit admission due to space and facilities available.

I, (print name) _____, authorize Tri Star Career Compact to release my educational records which include my name, resume, and the above requested information for job placement/employment and/or educational purposes.

____ My initials here acknowledge that I do hereby consent to and authorize the use and distribution of my photograph, image, likeness and voice by Tri Star Career Compact for publicity, promotional, advertising, and any other lawful purposes in or through any medium, including print publications, television or radio broadcasts, and online publication via the internet.

My signature is my acknowledgment that I have read and voluntarily consent.

Signature of Student: _____ Date: _____

Signature of Parent or Guardian if student is under the age of 18: _____

Submit this application to: Tri Star Career Compact, 7655 State Route 703, Celina, OH 45822
Attention: Marcia Helentjaris