



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: _____

Currently Employed? YES NO

Address: _____

Employer's Name: _____

City: _____

Description of current job: _____

State: _____ Zip: _____

Date of Birth: ____/____/____

Year Started Current Job: _____

Sex (circle one): M F

Select Course of Interest:

Cell Phone: _____

FANUC Robotics

Email: _____

Forklift Training

High School: _____

Machining/CNC

Are you a high school graduate? YES NO

ServSafe

Highest Grade Completed: _____

Welding I

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

* 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