



CAREER AND COLLEGE PROMISE (CCP)

APPLICATION FOR ADMISSION



NOTICE TO STUDENT: The information that you provide below will be placed in our master file. If any of this data changes, you must notify the Registrar's Office immediately to ensure that your record is accurately maintained. Information on race and sex is required for data gathering purposes only. Answer all questions completely and accurately. Incomplete applications, including submission of required test scores and transcripts, may delay/prevent your acceptance and enrollment.

TERM TO ENROLL (check one): Fall Spring Summer YEAR: _____

SOCIAL SECURITY NO: _____ - _____ - _____ (Your voluntarily provided SSN is used for identification of your record only.)

FULL LEGAL NAME (Please print): _____

Last	First	Middle/Former
ADDRESS: _____		
Street Address (incl. house #)	City	State Zip

Grade level at start of CCP (circle one): 9 10 11 12 High School Name: _____

HOME COUNTY: Chatham County Harnett County Lee County Other (specify): _____

HOME PHONE NUMBER: () _____ CELL PHONE NUMBER: () _____

EMAIL ADDRESS: _____

SEX: Male Female DATE OF BIRTH: _____ ETHNICITY: Hispanic Non-Hispanic

RACE (check all that apply): American Indian/Alaska Native Asian Black/African American Native Hawaiian/Other Pacific Islander White

CITIZENSHIP: U.S. Citizen Permanent Resident Non-immigrant alien Deferred Action– DACA

If non-U.S. citizen, put country of citizenship: _____

REASON FOR ENROLLING: to obtain a degree, diploma, or certificate to enhance employment skills for a field of work
 to take courses to transfer to another college to take courses for personal enrichment or interest

Expected date of graduation: _____ HS County: Chatham Harnett Lee Other

PRIMARY PROGRAM OF STUDY (select with Advisor; see back for additional options)

College Transfer (Pre-Associate): Arts (P1012C) Engineering (P1052C) Nursing (P1032C) Science (P1042C)

Career & Technical Education Programs (check and circle if more than one level offered):

- | | |
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| <ul style="list-style-type: none"> <input type="checkbox"/> Accounting & Finance (C25800CW) (D25800CW) <input type="checkbox"/> Accounting & Finance (C25800CP)* <input type="checkbox"/> Automotive Systems Tech (C60160CW)* (D60160CW) <input type="checkbox"/> Auto. Restoration Tech (C60140CW)* (D60140CW) <input type="checkbox"/> Barbering (C55110CP)* <input type="checkbox"/> Broadcasting Prod Tech (C30120CW)* (D30120CW) <input type="checkbox"/> Broadcasting/Podcasting and Digital Audio (C30120CP)* <input type="checkbox"/> Business Administration (C25120CW) (D25120CW) <input type="checkbox"/> Business Administration (C25120CP)* <input type="checkbox"/> Business Admin/Social Media Marketing (C25120SO)* <input type="checkbox"/> CAT Apprenticeship Program: (C50240CW) & CECCP <input type="checkbox"/> Computer Int Machining (C50210CP)* (D50210CW) <input type="checkbox"/> Cosmetology (C55140CP)* <input type="checkbox"/> Criminal Justice Technology (C55180CW)* (D55180CW) <input type="checkbox"/> Criminal Justice/ Forensic Science (C55180CCW)* <input type="checkbox"/> Culinary Arts (C55150CP)* <input type="checkbox"/> Dental Assisting (C45240CW) <input type="checkbox"/> Early Childhood Education (C55290CW)* (D55220CW) <input type="checkbox"/> Early Childhood Edu/Infant & Toddler (C55290CP)* <input type="checkbox"/> Electronic Engineering Tech (C40200CW)* (D40200CP) | <ul style="list-style-type: none"> <input type="checkbox"/> Health & Fitness Science (C45630CW)* <input type="checkbox"/> Health Information Technology PAS (C45360CW)* <input type="checkbox"/> Healthcare Management Tech (C25200CW)* <input type="checkbox"/> Human Services Technology (D45380CW) <input type="checkbox"/> Industrial Systems Tech (C50240CW)* (D50240CW) <input type="checkbox"/> Information Tech (C25590CW)* (C25590C3)* (D25590CW) <input type="checkbox"/> Information Tech / Computer Programming (C25590CP) * <input type="checkbox"/> Laser and Photonics (D40280CP) <input type="checkbox"/> Library and Information Tech (C55310CW)* (D55310CW) <input type="checkbox"/> Manicuring/Nail Technology (C55400CW)* <input type="checkbox"/> Mechanical Engineering Tech (C40320CW)* <input type="checkbox"/> Medical Assisting (D45400CW) <input type="checkbox"/> Medical Office Administration (D25310CW) <input type="checkbox"/> Motorcycle Mechanics (C60260CW)* (D60260CW)* <input type="checkbox"/> Nurse Aide (D45970CW) <input type="checkbox"/> Paralegal (C25380CW)* <input type="checkbox"/> Sustainability Technologies (D40370CW) <input type="checkbox"/> Sustainable Agriculture (D15410CW) <input type="checkbox"/> Veterinary Medical Technology (C45780CW) <input type="checkbox"/> Welding Technology (C50420CW)* (D50420CW)* |
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* indicates available programs for students with an unweighted GPA below 2.8

Student Waiver Information

By signing this form, I agree to the following terms:

Waiver for Release of Information: FERPA, The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. It does not allow Central Carolina Community College (CCCC) to communicate with anyone regarding a student without the student's express permission. In order to ensure student success, it is suggested that students participating in the Career and College Promise Program sign the below waiver. The waiver will grant CCCC the right to communicate with the high school and parents of the high school student participants regarding student progress, grades and attendance.

Media Release: I agree to the terms outlined in the media release agreement found at http://www.cccc.edu/high-school/ccp/files/CCP_MediaRelease.pdf.

Students with Disabilities: Services are offered at the request of the student through our Special Populations Services office. Information about requesting accommodations can be found online: <http://www.cccc.edu/student-services/specialpopulations/>

Student Expectations: High school students taking college courses at Central Carolina Community College will abide by the Student Code of Conduct and all other CCCC Policies and Procedures.

I certify that the information provided in this application is complete and accurate to the best of my knowledge. I certify the submission of this application for processing to enroll in the dual enrollment program.

Student Signature (required to process): _____ **Date** _____



STUDENTS, PLEASE STOP HERE



Special Conditions for CCP Enrollment (Please check one if applicable)

CTE WAIVER ATTACHED: If a student's unweighted GPA is below 2.8, Principals (or their designee) must submit a waiver to allow a student's entry into CTE Pathway(s). If a waiver is submitted, the Principal (or designee) must submit the CTE Waiver form or provide a written rationale for why the GPA requirement should be waived. **CTE Pathways that include Universal General Education Transfer Component courses will not be eligible for the principal/designee waiver for entry into the CCP Program.**

DUAL PATHWAY ENROLLMENT: This student has permission to enroll in the following secondary CTE pathway:
 Program name: _____ Program Code: _____

Approval for CCP Enrollment

HIGH SCHOOL PERMISSION FOR ENROLLMENT: Permission is granted for this student to enroll in one or more college curriculum courses. Additionally, I certify that this student will be (a) a junior or senior and (b) making appropriate progress toward graduation at the time of enrollment. If at any time the student stops progressing toward graduation, I will notify the college.

High School Principal (or designee): _____ **Date:** _____

NOTE TO HIGH SCHOOL: Please attach current transcript OR placement test scores.

COLLEGE PERMISSION FOR ENROLLMENT: Permission is granted for this student to enroll in one or more college curriculum courses. Students who meet initial enrollment criteria require only the CCP Representative signature below. If Dual Pathways are being requested, both signatures below are required.

CCP Representative: _____ **Date:** _____

College Representative: _____ **Date:** _____
Chief Academic Officer or Chief Student Development Administrator

FOR CCCC USE ONLY:

New Students Unweighted HS GPA:

Testing Information (leave blank if not required)

	English	Reading	Math
Test			
Score			

Assigned Advisor:

Name: _____

ID#: _____