

# APPLICATION FOR MINUTEMAN TECHNICAL INSTITUTE

## POST GRADUATE ADMISSION

758 Marrett Road | Lexington, MA 02421  
P: 781.861.7151 | F: 781.863.7147 | E: mti@minuteman.org

### Applicant Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Education and Employment Information

High School Attended: \_\_\_\_\_ Last Month/Year Attended: \_\_\_\_\_ Degree/Certificate Earned? \_\_\_\_\_

College Attended: \_\_\_\_\_ Last Month/Year Attended: \_\_\_\_\_ Degree/Certificate Earned? \_\_\_\_\_

Most Recent Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Your Position: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Have you ever been enrolled previously in any career & training program? Yes No If yes, what school? \_\_\_\_\_

Please indicate how you learned about our programs: \_\_\_\_\_

### Career Area of Interest

Please choose three areas of interest and rank them: 1 - First Choice, 2 - Second Choice, 3 - Third Choice

- |                                  |                                     |
|----------------------------------|-------------------------------------|
| Advanced Automotive Technology   | Early Education & Care              |
| Building Construction Technology | Electrical Wiring                   |
| Cosmetology                      | Horticulture & Landscape Technology |
| Culinary Arts / Baking           | Metal Fabrication & Welding         |

### Voluntary Equal Educational Opportunity Section

Completion of the following information is strictly voluntary and will not be used as a condition of admission. This information is used for Equal Educational Opportunity statistics only.

Applicant Gender:	Male	Female	Accommodations needed during application process?	Yes	No
Applicant has a disability?	Yes	No	If yes, describe:	_____	
Limited English Proficiency:	Yes	No	Race:	American Indian or Alaska Native	Asian
Primary Language:	_____			Black or African American	Caucasian or White
Single Parent?	Yes	No		Native Hawaiian or Other Pacific Islander	
Economically Disadvantaged?	Yes	No	Ethnicity:	Hispanic or Latino	
Displaced Homemaker?	Yes	No			

### Signature Section

The statements and information furnished by the undersigned in this application for the Post Graduate Programs are true and complete. The undersigned applicant gives permission to release school records, including complete transcript, attendance record, and conduct/discipline record. The undersigned acknowledges admission to MTI is based on availability in the programs, Background checks, and completion of the admissions process.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit application along with a \$20 nonrefundable Application and Testing Fee. Cash, Check, MasterCard, or Visa are accepted.**

Card #: \_\_\_\_\_ Name on Card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_