

Health Careers High School

@

MLK Career Campus



*Admission Application
School year 2009 – 2010*

*Health Careers High School @ MLK Career Campus
1651 East 71st Street
Cleveland, OH 44103
216-426-7079*

Dear Student,

We are pleased that you are considering Health Careers as your school of choice for your high school years. Please complete the application process, which will be reviewed by the admissions committee to determine your selection. Applicants will be notified of acceptance to Health Careers.

Students entering the ninth grade may apply for admission to Health Careers. Students admitted into a specific program are expected to remain for the four-year course sequence and complete all requirements as established by each program. Additional information regarding particular programs will be provided to interested applicants.

To apply for Health Careers High School admission, please complete the following steps:

- 1. *Student Information Sheet*: completed by student & parent/guardian with signatures.**
- 2. *Teacher Reference*: completed by English, Mathematics & Science teachers.**
- 3. *Student Interest Essay*: completed by student.**
- 4. *Academic Achievement*: current report card submitted by student**

For information regarding the application process or on a specific program, please contact the main office at (216) 426-7079.

HEALTH CAREERS HAS A REQUIRED DRESS CODE!!

Health Careers High School
Student Recruitment Application
2008 – 2009 School Year

Cynthia Hanish, Principal

Health Careers High School is a specialty magnet school for high achieving students interested in the health care profession. Health Careers has been designated as an *Ohio School of Promise* for the last four school years. This award is given to schools who meet high academic standards & goals set by the Ohio Department of Education.

Health Careers High School students have the opportunity to gain first-hand experience in the health care field while earning a state vocational certificate along with their high school diploma.

There are four (4) career options currently available at Health Careers High School:

Dental Assistant Program
Dental Lab Technician Program
Medical Assistant Program
Nurse Assistant Program

We are looking for students with a commitment to high academic standards while learning valuable health career skills. **Successful applicants must have above-average grades, good attendance, positive behavior & attitude and no suspensions.**

**** Application deadline is May 15, 2009**

Student Name _____ Student ID# _____

Address _____ City _____ Zip code _____

Birth date _____ Gender M F Grade _____ GPA _____

Current School _____ Principal _____

Parent/Guardian Name _____

Home Phone # _____ Cell Phone _____ Work Phone # _____

Is the student receiving Special Education services? YES NO

If you circled YES please send a copy of your child's IEP with this application.

ATTACH COPY OF CURRENT REPORT CARD WITH THIS APPLICATION

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

**Send completed application & current report card to:
Health Careers High School @ MLK Career Campus
1651 East 71st
Cleveland, OH 44103
ATTN: Ms. C. Hanish**

English Teacher Recommendation Form

Student Name _____

Teacher's Name _____ Title _____

How long and in what capacity have you known the applicant?

What are her/his greatest strengths? _____

What are her/his greatest needs? _____

	NO BASIS FOR JUDGEMENT	EXCELLENT	GOOD	AVERAGE	BELOW AVERAGE
INTELLECTUAL ABILITY					
REACTION TO CRITICISM					
CLASS PARTICIPATION					
MATURITY/INDEPENDENCE					
RAPPORT WITH ADULTS					
RAPPORT WITH PEERS					
CONCERN FOR OTHERS					
CONCERN FOR SELF					

Have you had to take disciplinary action with this applicant? If so, please explain.

Does the applicant have any emotional difficulties of which the school should know about?

Please feel free to add any additional information that you feel will be helpful to the admissions committee.
Thank you for taking time to complete this recommendation.

Signature: _____ Date _____

School: _____ Address: _____

School telephone: _____

Email and/or fax: _____

Science Teacher Recommendation Form

Student Name _____

Teacher's Name _____ Title _____

How long and in what capacity have you known the applicant?

What are her/his greatest strengths? _____

What are her/his greatest needs? _____

	NO BASIS FOR JUDGEMENT	EXCELLENT	GOOD	AVERAGE	BELOW AVERAGE
INTELLECTUAL ABILITY					
REACTION TO CRITICISM					
CLASS PARTICIPATION					
MATURITY/INDEPENDENCE					
RAPPORT WITH ADULTS					
RAPPORT WITH PEERS					
CONCERN FOR OTHERS					
CONCERN FOR SELF					

Have you had to take disciplinary action with this applicant? If so, please explain.

Does the applicant have any emotional difficulties of which the school should know about?

Please feel free to add any additional information that you feel will be helpful to the admissions committee. Thank you for taking time to complete this recommendation.

Signature: _____ Date _____

School: _____ Address: _____

School telephone: _____

Email and/or fax: _____

Mathematics Teacher Recommendation Form

Student Name _____

Teacher's Name _____ Title _____

How long and in what capacity have you known the applicant?

What are her/his greatest strengths? _____

What are her/his greatest needs? _____

	NO BASIS FOR JUDGEMENT	EXCELLENT	GOOD	AVERAGE	BELOW AVERAGE
INTELLECTUAL ABILITY					
REACTION TO CRITICISM					
CLASS PARTICIPATION					
MATURITY/INDEPENDENCE					
RAPPORT WITH ADULTS					
RAPPORT WITH PEERS					
CONCERN FOR OTHERS					
CONCERN FOR SELF					

Have you had to take disciplinary action with this applicant? If so, please explain.

Does the applicant have any emotional difficulties of which the school should know about?

Please feel free to add any additional information that you feel will be helpful to the admissions committee.
Thank you for taking time to complete this recommendation.

Signature: _____ Date _____

School: _____ Address: _____

School telephone: _____

Email and/or fax: _____