



2562 Centennial Road ~ Salina, KS 67401
785-309-3100 ~ 800-466-7989 ~ FAX 785-309-3101

SAT Office Use Only

Date Rec'd _____	Student ID # _____
Campus Fee \$ _____	Rec.# _____
Program Fee \$ _____	Rec.# _____
Tuition \$ _____	Rec.# _____
Tool Rental \$ _____	Rec.# _____
Letter _____ Entered _____	Fees _____ Transcript _____

Revised 04/03/2007

APPLICATION FOR ADMISSION

The \$70.00 campus fee must accompany this form for all Post Secondary student.

(All High School students please contact the Student Service office at the phone number listed above for fees)

Failure to fully complete this form or pay campus fee may delay enrollment

Please type or print in ink.

PERSONAL INFORMATION:

Name _____
(First) (Middle) (Last)

Preferred Name (Nickname) _____

Permanent Address _____

(City) (State) (Zip) (County)

Phone No. () Cell No. ()

E-Mail: _____

Date of Birth _____ U.S. Citizen Yes No

Social Security No. _____

Veteran Yes No Veteran Benefits Yes No Chapter No. _____

Nearest Relative: (Please check appropriate box)

Parent Guardian Spouse

Name _____

Home Address _____

(City) (State) (Zip) (County)

Phone number ()

The following information will be used for statistical purposes only. (Please check appropriate box)

Marital Status: Single Married

Gender: Male Female

Ethnicity: _____ African American _____ Caucasian
_____ American Indian _____ Asian _____ Hispanic

Other _____

EDUCATIONAL HISTORY: (Please list all of the schools you have attended including high school, college, tech school, etc.)

Name of Institution	Address	City/State	Zip	Graduation Year

* If you have a GED please indicate above. If you do not have a high school diploma or GED contact SAT for specific enrollment information.

PROGRAM INFORMATION

Intended Start Date (month) _____ (year) _____

High School Transcript or GED scores required (Please check appropriate boxes below)	<input type="checkbox"/> HIGH SCHOOL am / pm	<input type="checkbox"/> POST SECONDARY Full Time or Half Time am / pm
<input type="checkbox"/> Applied Electronic Technology	<input type="checkbox"/> Auto Body Technology	<input type="checkbox"/> Automotive Technology
<input type="checkbox"/> Business & Computer Technology	<input type="checkbox"/> Commercial & Advertising Art	<input type="checkbox"/> Computer Aided Drafting
<input type="checkbox"/> Construction Trades	<input type="checkbox"/> Dental Assistant	<input type="checkbox"/> Diesel Technology
<input type="checkbox"/> *Environmental Technology	<input type="checkbox"/> *Health Occupations (CNA, HHA, CMA)	<input type="checkbox"/> HVAC
<input type="checkbox"/> Machine Shop	<input type="checkbox"/> Medical Assistant	<input type="checkbox"/> Welding
*Billing information required for Environmental Technology students _____		
* Health Occupations classes are open to high school students only. (Completers are required to take a state certification exam)		

Why are you attending Salina Area Tech? _____ Occupational skill _____ Upgrade or improve existing skills _____ Personal enrichment

How did you hear about our school? Radio _____ TV _____ Newspaper _____ SAT Student _____ Other _____

Applicant Signature _____ Date _____

Parent Signature if Applicant is under 18 _____ Date _____

In accordance with Title IX of the 1972 amendments, SAT does not discriminate on the basis of sex, race, religion, national origin, age or handicap in the operation of its educational programs and activities, recruitment, and admissions and employment practices.