



Lake Technical College

CAREER DUAL ENROLLMENT

APPLICATION ~ 2024/2025

Spring Application period: September 1 – November 15, 2024

Fall Application period: February 15 – April 30, 2025

To start the application process for Career Dual Enrollment (“CDE”), please provide the information below and submit the completed form to Lake Technical College’s Admissions Office at 2001 Kurt Street, Eustis, FL 32726 or via email to LTCAdmissions@lake.k12.fl.us. Completing all dual enrollment requirements requires multiple steps, so it is recommended that you begin the process early in the application period. All pages of this form and all application steps must be completed and submitted before the deadline to be considered for dual enrollment.

TO BE COMPLETED BY THE STUDENT

LAST NAME: _____ FIRST NAME: _____
 CELL PHONE #: _____ HIGH SCHOOL: _____
 EMAIL ADDRESS: _____
 CURRENT GPA: _____ GRADE DURING 2024/2025: _____ BIRTHDATE: _____
 VALID DRIVER’S LICENSE: YES NO COUNSELOR NAME: _____

Please check your program(s) of interest:

** Must be a Senior + Age restrictions ^ Full-time enrollment required # Must have valid Driver’s License*

<Hybrid Schedule Available °Transportation Innovation Hub √Institute of Public Safety ~Fall Registration Only

- Accounting Operations<**
(FT: 8:15am-4:15pm; PT: 8:15am-11:45am or 12:15pm-4:15pm)
Hybrid schedule available ~ Ask for more details
 - Administrative Office Specialist<**
(FT: 8:15am-4:15pm; PT: 8:15am-11:45am or 12:15pm-4:15pm)
Hybrid schedule available ~ Ask for more details
 - Advanced Manufacturing and Production Technology**
(FT: 7:30am-3:30pm; PT: 7:30am-11:30pm or 12:00pm-3:30pm)
 - Automotive Collision TechnologyTechnician#**
(FT: 8:00am-4:00pm; PT: 8:00am-12:00pm or 12:30pm-4:00pm)
 - Baking & Pastry Arts^~**
(FT: 4:00pm-9:00pm)
 - Cloud Computing & Virtualization**
(FT: 8:15am-4:15pm; PT: 8:15am-11:45am or 12:15pm-4:15pm)
 - CNC Production Specialist***
(FT: 7:30am-3:30pm; PT: 7:30am-11:30am or 12:30pm-3:30pm)
 - Computer Systems & Information Technology (CSIT)**
(FT: 8:15am-4:15pm; PT: 8:15am-11:45am or 12:15pm-4:15pm)
 - Diesel Systems Technician#°**
(FT: 8:00am-4:00pm; PT: 8:00am-12:00pm or 12:30pm-4:00pm)
 - Heating, Ventilation, Air-Conditioning /Refrigeration (HVAC)*#~**
(PT: 12:15pm-3:45pm)
 - Master Automotive Service Technology#°~**
(FT: 8:00am-4:00pm; PT: 8:00am-12:00pm or 12:30pm-4:00pm)
 - Medical Assisting*+##**
(FT: 8:15am-4:15pm; PT: 12:15pm-4:15pm)
 - Patient Care Technician*^+##**
(FT: 8:00am-4:00pm)
 - Pharmacy Technician*+##<**
(FT: 8:15am-4:15pm; PT: 12:15pm-4:00pm)
 - Professional Culinary Arts & Hospitality^**
(FT: 7:30am-3:30pm)
 - Public Safety Telecommunications*+ √**
(Online class)
 - Veterinary Assisting*^+##~**
(FT: 8:00am-4:00pm)
 - Welding Technology*~**
(PT: 7:30am-11:30am or 12:00pm-3:30pm)
 - I do not know – I need help deciding**
- ***Class times are approximate and will be finalized during enrollment*****

PARENT/GUARDIAN NAME: _____ RELATIONSHIP: _____

CONTACT #: _____ EMAIL: _____

WRITTEN PROMPT: In approximately 100 words, tell us why you are applying to Lake Technical College for Career Dual Enrollment. Please include your future career goals and how attending your selected program will help you reach them. (Attach a separate paper, if needed)

We have reviewed and understand the guidelines and expectations outline in the Career Dual Enrollment Information Packet online (<https://www.laketech.org/high-school-opportunities/steps-to-apply>) and now submit this application for consideration.

Student Signature: _____ Guardian Signature: _____

TO BE COMPLETED BY GUIDANCE COUNSELOR:

COUNSELOR NAME: _____ PHONE #: _____ CISCO EXT: _____

- Current GPA: _____
- Does the student have a 504 or IEP? (If yes, attach documentation): YES NO
- Has the student been suspended from high school and/or have recurring behavioral concerns? YES NO
- Has the student taken the PERT, SAT, or ACT in the past 2 years? (If yes, attach scores) YES NO
- Is the student "on track" for timely graduation? YES NO
- Has student passed all required core classes, tests, assessments, etc. in order to graduate? YES NO
 - If no, what test(s) are needed? _____
 - When will they be retaken? _____
- Check the schedule you prefer for the student. (LTC will do our best to accommodate, no guarantee):
 - Full-Time (approx. 8-4) Part-Time Morning (approx. 8-12)
 - Part-Time Afternoon (approx. 12-4) No preference
- Notes/Other: _____

SIGNATURE: _____ DATE: _____

Office Use Only

Date Submitted: _____ Info. Release Signed: YES NO 504: YES NO

Program Shadow Date: _____ BSA: R _____ M _____

Approved Program: _____ Time Scheduled: _____

Dean of Student Services: Approved Denied Date: _____ Signature: _____

Authorization for the Release of Educational Records



To Whom it May Concern:

The following student has enrolled at our school. Please send all records including copies of the cumulative files, grades, courses taken, test scores, special education plans, current individualized education plan (IEP), health records, immunizations dates, psychological and/or Social Worker reports, mental health records, discipline records, and behavioral threat assessments if any. Additionally, please include all current grades earned this school year and/or withdrawal grades, if any.

STUDENT INFORMATION:

_____ Student Legal Name (Last, First, Middle initial)	_____ Date of Birth (MM/DD/YYYY)
_____ Parent(s) / Guardians(s) Legal Name	_____ Primary Parent Phone Number

REQUEST RECORDS FROM:

_____ Name of Last School Attended			
_____ Mailing Address of Last School Attended	_____ City	_____ State	_____ Zip Code
_____ Phone Number	_____ Fax Number		

RELEASE RECORDS TO:

<u>LAKE TECHNICAL COLLEGE - ATTN: Admissions, Special Populations Advisor</u>			
Receiving Lake County School			
<u>2001 KURT STREET</u>	<u>EUSTIS,</u>	<u>FL</u>	<u>32726</u>
Mailing Address of Receiving School	City	State	Zip Code
<u>352.589.2250, Press #1</u>	<u>(LTCAdmissions@lake.k12.fl.us)</u>	<u>352.483.2611</u>	
Phone Number	Email	Fax Number	

Security and confidentiality of education, health, and medical records are of critical importance to Lake County Schools. Information contained in a student's educational record is protected by the Family Educational Rights and Privacy Act (FERPA) of 1974 (20 U.S.C. §1232g). "Education record" includes those records, files, documents, and other material that contain information directly related to the student and are maintained by Lake County Schools or a person acting on behalf of Lake County Schools. The Health Insurance Portability and Accountability (HIPAA) of 1996 Privacy Rule (Code of Federal Regulations, Title 45, Part 164) governs how "covered entities" may use and disclose "protected health information." Lake County Schools personnel adhere to all regulations contained in relevant Federal laws and Florida statutes.

Your authorization to release this information is strictly voluntary. You may revoke your authorization for release in writing at any time by providing a written revocation to Lake County Schools. However, any written revocation will not apply to any information already released in response to this authorization. **Without any written revocation, this authorization will remain in effect for one (1) year.**

You have a right to inspect and obtain a copy of any information disclosed. You acknowledge that once disclosed, protected health information may be subject to redisclosure by the recipient, and may no longer be protected by HIPAA's privacy rules.

Per FERPA, educational records requested from a receiving educational institution do not require parent signature for release.

I understand that by signing this authorization, I am waiving my rights of nondisclosure of these records under federal and Florida law only to the persons or entities specifically listed.

I, _____ (Parent/Guardian/Eligible Student), hereby give my permission for _____ to share records by verbal, written, or electronic means with the Lake County Schools' personnel.

 (School/Agency)

Signature: _____ Date (MM/DD/YYYY) _____

CAREER DUAL ENROLLMENT (CDE) RELEASE OF INFORMATION FORM

Lake Technical College

2001 Kurt Street
Eustis, Florida 32726
352.589.2250
www.laketech.org



The Family Educational Rights and Privacy Act of 1974 (FERPA) is a federal law that protects the privacy of student educational records. Even though Career Dual Enrollment (CDE) students may be considered “dependent minors,” under FERPA they have rights to privacy in all matters relating to their post-secondary educational record. Generally, Lake Technical College (LTC) will not release details relating to protected student information to non-LCSB officials without the student’s written consent. The practice of not releasing information extends to the release of information to parents and guardians. LTC strongly suggests that students complete the LTC Release of Information Form (below) in order to comply with FERPA guidelines prior to enrollment so LTC will be able to communicate with the parent/guardian.

As a CDE student, LTC’s communication with the home high school guidance counselor, staff, and/or administration is absolutely necessary and allowed without written consent. Under FERPA, the CDE postsecondary student may elect to allow LTC to speak to additional individuals (parents/guardians/etc.) with written consent, or they may elect to decline the release of any information to these additional individuals. Please indicate your choice below:

RELEASE OF INFORMATION

Date: _____ Student’s Social Security#: _____

Printed name of Student: _____

I GIVE PERMISSION to LTC to give the following person(s) and/or organization(s) information regarding my participation, progress, and behavior in my program at LTC. I understand that I may withdraw permission if I submit a request in writing to the Admissions Office of Lake Technical College. **Initial:** _____

NAME OF PERSON and/or ORGANIZATION	PHONE NUMBER

I **DO NOT** GIVE PERMISSION to LTC to release any information regarding my participation, progress, and behavior in my program at LTC to any additional person(s) or organization(s). **Initial:** _____

Signature of Student

Signature of witness