

Core Course Eligibility Form

We recommend that you visit with a counselor for assistance in completing this form.

Name: _____
Last First MI

Student ID Number: _____ Phone No. (_____) _____

Permanent Address: _____
Street/RFD/PO Box

City State Zip

Mailing Address: _____
Street/RFD/PO Box

City State Zip

Note that all academic and/or program requirements must be completed and documentation be on file with the Admissions Office in order for this form to be processed.

Program Choice: _____

Semester (check one): January June August Year: _____

Campus Location: _____

Reminders:

- Be sure to apply for a semester when you will be prepared to begin. Applicants are considered for openings and/or placed on waiting lists by date of eligibility regardless of the semester they request on this Core Course Eligibility Form.
- Applicants to any program that has CPR as an admission requirement (Surgical Technologist, Fire Medic and Paramedic Technician) must have **current** CPR certification on file in the Admissions Office at the time this form is submitted. It is the applicant's responsibility to **maintain current** certification at the appropriate level.

If there is a waiting list for the program and semester/year listed above, would you like to be added to that waiting list? Yes No

I certify that the information on this form is true and complete to the best of my knowledge:

Student's Signature: _____ Date: _____

Complete, sign, and submit this form to: Admissions Office
Chippewa Valley Technical College
620 W. Clairemont Avenue
Eau Claire, WI 54701-6162