

Classes will be on Tues/Thurs from 3:30-5:30pm
First day of class will be on Tues, Oct 18, 2016 at JEL (ETC Program)
and at JAS (Electric Vehicles Program and Haumana Store)



NAME (Last, First, MI) _____ GRADE _____

ADDRESS _____ CITY _____ ZIP CODE _____

HOME PHONE _____ CELL PHONE _____

GRADE POINT AVERAGE (GPA from last quarter) _____ DATE OF LAST GPA _____

PLEASE INDICATE (with an "X") WHICH PROGRAM YOU ARE INTERESTED IN:

- Electric Vehicles Program
- Electronic Technical Center
- Haumana Store

Why do you want to enroll in the Learning Center Program? _____

Student Signature/Date: _____

Parent/Guardian Recommendation: Why should your child be accepted into the Learning Center Program? _____

Parent Signature/Date: _____

Teacher Recommendation: Based on your experience with this student, why should he/she be accepted into the Learning Center Program? _____

Teacher Name/Title/School: _____

Teacher Signature/Date: _____

Submit application to Mr. Kiyon (J-Auto Shop) by Sept. 30, 2016