

## COUNSELOR EVALUATION FOR CTE PROGRAMS

Academic	Year:	
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Complete this form for high school students applying for admittance into a Cowley College Cal	reer &
Technical Education (CTE) program.	

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Student's Name:	
High School:	
Student's Anticipated HS Grad Year	
Program Name	
Location and Time:	

## **Program Options:**

Automotive Technology	Farm & Ranch (Agriculture)	Machine & Tool Technology	Manufacturing Technology (Mechatronics)	Nondestructive Testing (NDT)	Welding Technology
Arkansas City AM or PM	Arkansas City	Arkansas City AM or PM	Arkansas City AM	Arkansas City (Check for Intro times)	Arkansas City AM or PM
Mulvane AM or PM				Mulvane Eve	Mulvane AM or PM
	Sumner Wellington	Sumner Wellington AM	Sumner Wellington AM		Sumner Wellington PM or EVE
	Online/Online Synchronous				

Please indicate whether this student's academic records reflect anything that could hinder their performance/success in a College technical program as it relates to the following:

Academic Performance		Yes	No	
Attendance History			No	
Disciplinary Records			No	
Do you have any concerns whether the student is committed or can be successful in a technical program?		Yes	No	
Feel free to add additional comments or call to discuss this student with Jessica Dorman at 620.441.5279.				
Counselor Additional Co	mments:			
Counselor's Signature:	Date:			
Counselor's Name Printed:				
Submit completed form along with Dual Enrollment Permission Form to Email: <a href="mailto:DualEnrollment@cowley.edu">DualEnrollment@cowley.edu</a>				