ADULT APPLICATION PACKET

Admission Requirements include:

- ☐ Adult Application for Admission—please refer to the program fact sheets or visit www.rolla.k12.mo.us/schools/rtirtc/programs for application deadlines
- ☐ $50 non-refundable application fee ($25 for students returning in a consecutive year; allied health programs may have additional requirements and fees)
- ☐ Background check
  - ❖ Register online at www.health.mo.gov/safety/fcsr/
    - ▪ ($15.25 fee payable by debit or credit card)
    - ▪ Registration must be completed at the time application is submitted (proof of purchase email/receipt of purchase)
  - ❖ Completion of the Authorization For Family Care Safety Registry Background Verification Form
- ☐ High School diploma or equivalent
- ☐ Passing score on pre-entrance exam
- ☐ Driver's license or birth certificate
- ☐ Social Security card (must be signed)
- ☐ Completion of the FAFSA (Free Application for Federal Student Aid)

Eligible enrollees include graduates of accredited high schools or those who have the recognized equivalent of a high school diploma.

Students seeking financial aid are required to have on file, with the Financial Aid office, a copy of a high school diploma or a recognized equivalent before any monies are disbursed. Any student with an outstanding balance from a previous enrollment period must make payment arrangements prior to readmission.

All programs have a pre-entrance exam for new students. Allied health programs have a selection process that is specific to their program. For more information regarding selection processes, visit: www.rolla.k12.mo.us/schools/rtirtc/programs/.

The admissions policy is in compliance with the U.S. regulations for Title IV Federal Financial Aid; the Missouri Department of Elementary and Secondary Education; and the Commission of the Council on Occupational Education (COE), the accrediting agency for RTI/C.

Rolla Technical Institute
1304 East Tenth Street
Rolla, Missouri 65401
Phone: (573) 458-0150
Fax: (573) 458-0155

Rolla Technical Center
500 Forum Drive
Rolla, Missouri 65401
Phone: (573) 458-0160
Fax: (573) 458-0164

Adult Application for Admission

Name: Last, First, Middle (please print)	

Maiden and/or former Name(s)	Nickname	Applicant Email Address

Current Mailing Address	Applicant Cell Phone
	Applicant Home Phone
Current Physical Address	Applicant Work Phone
	Other Phone No.

City, State, Zip Code	County of Residence	School District of Residence

Program Selection #1	Program Selection #2

Are you a citizen of the US? ☐ Yes ☐ No   If no, do you plan to gain citizenship? ☐ Yes ☐ No

Have you had training in the Armed Forces? ☐ Yes ☐ No

Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☐ No
If yes, please explain:_____

Have you ever been convicted a law or ordinance regarding alcohol or drug usage? ☐ Yes ☐ No
If yes, please explain:_____

High School Diploma ☐ Yes ☐ No   Graduation year:_____

GED, HiSet, or other equivalency earned ☐ Yes ☐ No   Year earned:_____

Have you previously attended RTI/C?
If yes, what program?_____ Dates attended:_____
What professional certifications or licenses do you hold? _____
Highest level of education:
☐ High School Diploma or Equivalent ☐ Vocational/Technical Certification ☐ Associates ☐ Bachelors ☐ Other
Credit hours earned _____

Name of School, College, University Attended	Address, City, State, Zip Code	Dates Attended

Are you eligible for (please check all that apply)? ☐ VA Benefits ☐ A+ Scholarship

References: Please list below three professional references, such as an employer or teacher.   Please give full name, complete address, and phone number.

Name	Address	Phone Numbers	
Name:		Home:	
		Cell:	
		Work:	
Name:		Home:	
		Cell:	
		Work:	
Name:		Home:	
		Cell:	
		Work:	

Confidential Waiver Release: I waive ☐ do not waive ☐ my right to see professional reference letters from those I have listed on this application or identified in the future as needed in accordance with Federal Law PL96-380.

Contacts: Please list below three individuals, such as a parent/guardian or spouse, we may contact for follow-up purposes or in case of an emergency. Please give full name, complete address, and phone number.

Name	DOES THIS PERSON LIVE IN YOUR HOUSEHOLD	Address	Phone	
Name: Relationship:	☐Yes ☐No		Home:	
			Cell:	
			Work:	
Name: Relationship:	☐Yes ☐No		Home:	
			Cell:	
			Work:	
Name: Relationship:	☐Yes ☐No		Home:	
			Cell:	
			Work:	

The information given on this form is true and complete* to the best of my knowledge.

*Any misrepresentation, falsification or omission of information or any other attempt to deceive a school is cause for either denial or selection for admission or dismissal from enrollment; any future application(s) shall not be considered by Rolla Technical Institute/Center.

_____   _____

Applicant Signature   **Date**

How to submit this application:

Please submit application with the $50.00 non-refundable application fee ($25 for returning students in consecutive years) to:

Student Services at RTC (medical programs) or RTI (all other programs).

Applications may be mailed or submitted in person.

We accept cash (exact amount), check, money order, or credit/debit cards for payment of the application fee.

Statement of Non-Discrimination

Rolla Technical Institute and Rolla Technical Center are affirmative action institutions. No person shall, on the basis of race, sex, creed, color, or disability, be subjected to discrimination in employment or in admission to any educational program or activity. As required by law, the district will provide equal access to district facilities and related benefits and services and will not discriminate against any group officially affiliated with the Boy Scouts of America, the Girl Scouts of the United States of America, or any other youth group designated in applicable federal law. RTI/C is fully accessible to the individual with a disability.

*Inquiries regarding the implementation of this policy should be directed to: Title IX Section 504 Coordinator, Assistant Superintendent of Human Resources, Rolla Public School District No. 31, 500 A Forum Drive, Rolla, Missouri 65401, (573) 458-0100.

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AUTHORIZATION FOR FAMILY CARE SAFETY REGISTRY
BACKGROUND VERIFICATION

Upon completion of the online registration with the Family Care Safety Registry at www.health.mo.gov/safety/fcsr/, I authorize **ROLLA TECHNICAL INSTITUTE/CENTER** to verify my background information on the Family Care Safety Registry website.

If I am selected into the program for which I am applying, this authorization will be valid for the length of the program at **ROLLA TECHNICAL INSTITUTE/CENTER**. I understand that my background information will be verified prior to admission and may be re-verified at any time while I am actively enrolled.

I understand that my social security number will only be utilized to verify the background information on the Family Care Safety Registry.

I hereby release **ROLLA TECHNICAL INSTITUTE/CENTER** from any claims, damages or liabilities of any kind that may directly or indirectly result from the use, disclosure, or release of such information by any person or party, whether such information is favorable or unfavorable to me, as a result of this background check.

I have read the above, understand its contents, and voluntarily agree to its terms.

Other first and/or last name(s) that the registry may be listed under_____

_____   _____
Signature   Date

_____   _____ _____
First   Middle   Last *(Print Name)*   Social Security Number   Birthdate
                                                                                                                    (Month/Day/YYYY)

_____   _____
Primary Program Applying For   Secondary Program Applying For (if applicable)

*Race/Ethnic Origin (please check all that apply)
     * The Rolla Public School District is required to make reports to the Office of Civil Rights and to the State of Missouri using the following Race/Ethnic categories. These are established by the State of Missouri and the U.S. Department of Education.

☐ Pacific Islander/Native Hawaiian   ☐ White   ☐ Black   ☐ Asian   ☐ American Indian

☐ Hispanic

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Financial Aid Basics

Apply for Financial Aid

1. FSA ID – go to www.fsaid.ed.gov you will need your email address and set up a pass word. Note: student and parent **must** have different email addresses. Student and parent must set up different FSA ID numbers. Parents cannot use the same FSA ID number as the student.
2. FAFSA – go to www.fafsa.ed.gov to file a Free Application for Federal Student Aid. Without a FAFSA, you will have to pay out of pocket. No Title IV funds can be awarded without one. You need to send your FAFSA to our school code: 005429. You can send your FAFSA to more than one school.

Check your Financial Aid Status

3. Check with RTI/C's Financial Aid office to insure your FAFSA has been received.
4. Once you receive your acceptance letter, make an appointment with RTI/C's Financial Aid office. Submitting your FAFSA does not set up your Financial Aid. You do not get a Federal Pell or loans just by submitting your FAFSA. Please contact RTI/C's Financial Aid office at 573-458-0101 X 16007 or send an email to Paula Vandegriffe, Financial Aid Administrator at pvandegriffe@rolla.k12.mo.us.

Aid sources – Once your FAFSA results are received by RTI/C and you receive your acceptance letter, you will be awarded financial aid according to your eligibility. You are considered for grants and loans from one or more of the following sources:

Grants & education benefits

Grant awards are based on your financial need as calculated by a federally-mandated formula and other eligibility as determined by RTI/C.

Scholarships

National and local awards; resources for searching and tips for successful application.

Loans

Federal, state, and/or private student loans. If you are planning on taking a Direct Loan you will have to complete the Entrance Counseling and Master Promissory Note at: www.studentloans.gov. You will not receive funding of loans until you have completed this training using your FSA ID. If you do not have a computer or internet, contact the Financial Aid office or Student Services office to assist you.

A+ Scholarship and Access Missouri Grant

The state of Missouri's deadline for Access Missouri Grant is February 1. Submit your FAFSA by January 31 and provide proof of Missouri residency (12 months) to qualify for this Grant. A+ Scholarships funding will be based on your financial aid package. Please provide your high school transcript with the stamped A+ seal (with dates and signature) to receive your A+ funding.