



MET Professional Academy 2021-22 Enrollment Application

STEPS TO SUBMIT YOUR APPLICATION

Step 1: Complete all form fields on the application.

Step 2: Meet with your counselor to obtain his or her approval.

Step 3: Submit your completed application to your counselor who will sign and scan your application and transcript to the MET.

Date:

Last Name:

First Name:

MI:

Student ID#:

Gender:

Birthdate:

Current Year in School:

High School of Attendance:

Cumulative GPA:

Current High School Counselor:

Counselor Signature:

Student Email:

Student Cell #:

Home Address:

City:

Zip:

Parent/Guardian's Name:

Parent/Guardian's Email:

Parent/Guardian's Home #:

Cell #:

Parent/Guardian Signature: _____

Check the strand you are applying for:

Medical

Engineering

Technology

Bioscience

If accepted, will you need district transportation from your home school to the MET, or will you be providing your own transportation?

District

Own



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Please evaluate yourself in the following areas:

SELF-ASSESSMENT TO BE COMPLETED BY APPLICANT					
Check only one level for each attribute: Levels: 1 (low) to 5 (high)					
Attributes:	1	2	3	4	5
Potential for success in this college/career pathway					
Willingness to comply with business ethics					
Leadership					
Self-Motivation					
Punctuality					
Reliability					

Please type your responses to the three questions below. You may attach a separate document, if needed.

Explain why you would like to attend the MET Professional Academy?

What characteristics do you possess that you believe will help you to be successful in the strand that you are applying for?

How did you hear about the MET?

Student Commitment:

I am applying for the MET Professional Academy. I have discussed the program with my parents/guardians and they have indicated their permission for me to be considered for this program. I understand that I will comply with appropriate business ethics (e.g. attendance, dress code, professional actions). I also understand that my business mentors and my high school team members depend on my commitment to the MET Professional Academy; therefore, I pledge to remain committed to the program and to complete my program of study.

Print Name _____ Signature _____

Please contact the MET Professional Academy Director, Barbara Coakley, at bcoakley@pusd11.net or 623-773-6701 with any questions or visit the MET website at <https://www.peoriaunified.org/MET>.