

MET Professional Academy 2022-23 Enrollment Application

STEPS TO SUMBIT 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 Atten	ndance:				
Cumulative GPA:						
Current High School Counselor:						
Counselor Signature:						
Student Email:						
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 fo	or: Medical	Engineering				
	Technolog	ogy Bioscience				
	Entreprer	Entrepreneurship 🔄				
If accepted, will you need district transportation from your home school to the MET, or will yoube providing your own transportation? District Own 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							
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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 Coordinator, Chad Eichenlaub, at ceichenlaub@pusdll.net or 623-773-670l with any questions or visit the MET website at https://www.peoriaunified.org/MET.