

CAREER & TECHNICAL EDUCATION PROGRAM

Application for Admission MTC Scholarship/Internship Program Application

1500 College Parkway Elko, NV 89801 775-753-2175

(Please print using blue or black ink)

Application Deadline: April 1*		Date_	Date		
Name		Hon	ne Phone		
	Cell Phone				
Other Names Used_		E-mail address			
Permanent Address					
	(Street Address)	(City)	(State)	(Zip)	
Mailing Address	(Street Address)				
	(Street Address)	(City)	(State)	(Zip)	
College(s) attended_					
I am applying to ente	er (you may select up to tw	-	e 1 st choice and 2 nd	choice):	
	☐ Diesel Technology	/ Program			
	☐ Electrical Systems	Technology Pro	gram		
	☐ Industrial Millwrigh	nt Program			
	☐ Welding Technolo	gy Program			
	☐ Instrumentation – Systems	must have AAS	or Certification in	Electrical	

*Deadline for first application review. If programs are not full, applications will be accepted after this date. Each department will admit a limited number of students. Meeting minimum application criteria does not guarantee admission to the program.

Great Basin College's Affirmative Action Statement

Great Basin College (GBC) is an Affirmative Action Opportunity (AA/EEO) educational institution. It is guided by the principle that equal opportunity means more than equal employment opportunity, and that access to facilities and services be available to all people regardless of their race, age, religion, color, sex, sexual orientation, disability, or national origin. This principle is applicable to every member of the GBC/NSHE community, both students and employed personnel at every level, and to all facilities and services. The following person has been designated to handle regarding the non-discrimination policies: Affirmative Action Officer, Great Basin College 775-753-2181.

Checklist for Career & Technical Education Application

Do not sub	omit the application until you have reviewed this checklist carefully.
	Have you included three letters of recommendation? Two (2) need to be either from a school administrator, school teacher or current/former supervisor; one may be a personal reference.
	Have you included your resume?
	Have you included your letter of intent (personal statement)?
	High school transcripts or GED scores, military training records and/or higher education records if applicable?
	Have you completed the Accuplacer* placements test for math and English? Or submitted your ACT or SAT scores at the GBC Admissions Office? Attach a copy of those records with this application. *Accuplacer tests can be taken at any of GBC's centers, and for more information contact a center near you.
	Have you completed the Application for Admissions and declared a major or attached the Application for Admission with this application? Applications can be obtained from our website at www.gbcnv.edu/admissions.
Admission	n Criteria
Department qualified appropriate highest qualified program. The	and Technical Education Department will admit a limited number of students to the CTE area disciplines each year. Admission is on a competitive basis. When there are more plicants than there are available spaces in the programs, preference will be given to those with qualifications. Meeting minimum application criteria does not guarantee admission into the ose students who meet or exceed the minimum criteria but who are not admitted may reapply ars. Please check with the program adviser for more information.
MTC Scho	olarship
includes an i consideration Cooperative	cholarship is supported by local mines and businesses. In most cases, this scholarship internship. Application for the MTC Scholarship is optional and not required for in into the programs. If you are interested in applying for the Maintenance Training (MTC) Scholarship complete the following. Applicants may be asked to take a mechanical insidered for this scholarship.
	e provide details:

Work History

Starting with your present or most rece	ent employment, list all	employ			ve had. Mo/Year
Employer Name		_From			
Address	City		_ST	Zip)
Phone	Supervisor Name_				
Type of Business		_			
Reason for Leaving					
Employer Name		_From			Mo/Year To
Address	City		_ST	Zip)
Phone	Supervisor Name_				
Type of Business		_			
Reason for Leaving					
Employer Name			Mo/Y	ear	Mo/Year
Address	City		_ST	Zip)
Phone	Supervisor Name_				
Type of Business		_			
Reason for Leaving					
Education Background					
Name of last high school attended					
Location					
Name/Location of college or trade scho	ool attended				
Major	Highest Leve	l comp	leted		

Mechanical Background/History

List any mechanical projects/accomplishments/achi	evements here:
Are you 18 years of age or older? Yes No _	
Have you been convicted of any crime, misdemeand offenses)? Yes No	or or felony, (other than routine traffic
If so, list dates of convictions and nature of offenses	S
Are you a U.S. Citizen or alien legally authorized to Yes No	work in the United States?
References – List a total of 3 references for this approach school administrator, school teacher or current/form	
Name	Title
Business Name	
CityST	Phone
Please mark appropriate box for type of reference:	School Teacher
	School Administrator
	Current or Former Employer
	Personal
Name	Title
Business Name	
CityST	Phone
Please mark appropriate box for type of reference:	School Teacher
	School Administrator
	Current or Former Employer
Name	Title
CityST	
Please mark appropriate box for type of reference:	School Teacher
	School Administrator

Current or Former 1	Employer
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Authorization

I authorize the MTC Selection Committee to contact all references listed. I understand that I can be terminated from my internship/scholarship by either Great Basin College officials or by my scholarship sponsor at any time if policies and procedures are not adhered to. I understand that the funding of my scholarship by my scholarship sponsor is also subject to meeting all application policies. I also understand that the MTC Scholarship Application will be shared with outside agencies for the purpose of interviews.

I understand that the company may make an offer of an internship contingent upon a full medical examination and drug screen by a company-approved physician.

To be considered for the MTC Program Scholarship and Internship, I understand that I must provide all of the required application items by the application deadline.

ame:	(Please Print)	
	(Signature)	
	(Date)	

Return completed application and scholarship to:

Bret Murphy, Dean of Applied Science
Great Basin College
1500 College Parkway
Elko, NV 89801

OR: Fax to -775-753-7534