



Columbia College Pre-Apprenticeship Initiative Application





The Columbia College Pre-Apprenticeship Initiative is a grant funded program. Its mission is to provide students in the program an introduction to a variety of careers in Information Technology through courses, hands-on experiences, workshops, field trips, job shadowing, and more.

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If you have any questions please contact Bo Locke at 209-588-5202 | lockeb@yosemite.edu

PLEASE PRINT CLEARLY (All information will be kept confidential)						
Contact Information						
Name:						
Address:						
Number and street	City	State	Zip			
	Oity	Otato	Ζίρ			
E-mail:						
Home phone:	Cell:	Best Time				
		to call:				
Huitama Chint Cinas (ainsta ana) C. M	I VI OVI OVI					
Uniform Shirt Size: (circle one) S M	L XL 2XL 3XL					
How did you learn about this program?						
Tiow did you learn about this program:						
Year of high school graduation:	or Y	ear of GED:				
Have you completed college units?	□ Yes □ No II	f yes, how many?				
Colleges/Universities attended (names/		, ,				
Colleges/Offiversities attended (flames/	uales).					
What are your educational goals? (circ	le ALL that apply)					
		chelor's Degree	Undecided			
Certificate Associa	te's Degree Ba	chelor's Degree	Ondecided			
Read, Sign and Date.						
I verify that the information on this form is correct and complete.						
	<u></u>					
Student Signature	Da	te				
Parent/Guardian Signature (required for all	students under 18 years of age) Da	te				

COLUMBIA COLLEGE PRE-APPRENTICESHIP INITIATIVE

INSTRUCTIONS: Use a pen with black or blue ink to complete this form. For multiple choice questions, make heavy dark marks that fill each square completely.

1.	First Name MI Last Name	8. Do you have a disability? 1□ Yes, I have a disability
2.	Today's Date: / _ / 2 0 Month Day Year	₀ □ No, I do not have a disability
2.	Date of Birth: / / / Month Day Year	9. Have you served on Active Duty (other than reserve status) in the U.S. Armed Forces? 1 Yes
3.	Gender: 1 □ Male 2 □ Female	□ No10. Please check each of the following sources of assistance tha anyone in your household received in the past month.
4.	Are you of Hispanic or Latino heritage? 1 □ Yes 0 □ No	MARK ALL THAT APPLY 1 ☐ TANF (Cash assistance) 2 ☐ SSI or SSDI
5.	What is your race? PLEASE CHECK ALL THAT APPLY 1 ☐ African American/Black 2 ☐ American Indian/Alaska Native 3 ☐ Asian 4 ☐ Native Hawaiian/Other Pacific Islander 5 ☐ White 6 ☐ Some Other Race (Write in):	General Relief General Relief Unemployment Compensation GOHER (Write in): IF NONE, MARK HERE
6.	What is the MAIN language you speak at home? MARK ONE BOX □ □ English □ □ Spanish □ □ Another language (specify):	
7.	What is the highest level of education you have achieved? 1 □ Did not complete High School 4 □ HS Diploma 5 □ GED 6 □ College Certificate (i.e. less than 2 year certificate) 7 □ Associate's degree (AA/AS) 8 □ Bachelor's degree (BA/BS) 9 □ Graduate degree 10 □ Other (Write in):	

Course Enrolled: Columbia College Pre-Apprenticeship

AGREEMENT AND RELEASE OF LIABILITY

This agreement is between: (Student)				
Address	City	State	Zip	
In the event that we need to get a hold	d of you today, please prov	vide your cell numbe	er	
And Yosemite Community College District and its	s instructors, members, ag	ents, authorized gu	ests and affiliated or	ganizations.
In consideration for enrollment in one or more p	rograms offered by the Co	olumbia College Pre-	-Apprenticeship. In	nake the
following statements and promises:				
I am aware that the Pre-Apprenticeship activity of and/or performing in situations that maybe dem			and that I will be pr	acticing
I am voluntarily taking these classes with knowle occur in the normal cause of events.		nd I agree to accept	any and all risk of in	ijury that may
If I have a disability or illness, I promise to consu Initial	ılt with my attending heal	th care provider befo	ore taking the above	instruction.
I agree that I, my heirs, legal representatives and 1. NOT make claims against Yosemite Corany damage to myself or another resul Community College District.	mmunity College District a ting from my participation	nd or the Instructor		
 Waive, release, and discharge Yosemite claims or demands arising from injury of offered by Yosemite Community College 	or damage to myself or an	other caused by my	participation in this	
I promise to defend, indemnify, and hold harmle and the Pre-Apprenticeship Instructors from any programs Initial				
I have carefully read this agreement and fully uncontract between myself and Yosemite Commun own free will.				
Date		Signature		
Date	Signature of pare	ent or legal guardian	if under 18 years of	age
In case of an emergency please contact		Phone Numl	ber	

Yosemite Community College District On-Camera Talent Release Form

For good and valuable consideration, the receipt of which is hereby acknowledged, I consent to the

photography and/or videography of myself and/or the recording of my voice; and the use of these photographs, videos and/or recordings singularly or in conjunction with other media for advertising, publicity, educational, commercial and/or other district-related purposes.						
I,, hereby grant to the Yosemite Community College District (YCCD) and its representatives the irrevocable and unrestricted right to use and publish photos/video of my image and recordings of my voice.						
I further consent to the reproduction and/or authorization by the YCCD to reproduce and use said photos, video and recordings of my voice, for use in all domestic and foreign markets. Further, I understand that others, with or without the consent of the YCCD, may use and/or reproduce such photos, video and/or recordings.						
I hereby release YCCD, and any of its associated or affiliated companies/organizations, their directors, officers, agents, employees and customers; and appointed advertising agencies, their directors, officers, agents and employees from all claims of every kind on account of such use.						
If talent is under 18: I,, am the parent/legal guardian of the individual named above, I have read this release and approve of its terms.						
Name (Print):						
Address:						
Phone: E-Mail:						
Student/Staff ID Number: (If current student or staff only)						
Signature: Date: Signature of parent or guardian if under 18 years of age.						



Yosemite Community College District 2201 Blue Gum Avenue, Modesto, California 95358 209-575-6550



Modesto Junior College 435 College Avenue, Modesto, CA 95350 209-575-6550

