

**\*\*Please return your application to the guidance office in your building\*\***



**APPLICATION**  
Date Received \_\_\_\_\_  
Date Approved \_\_\_\_\_  
Date Disapproved \_\_\_\_\_  
Pending \_\_\_\_\_

## Millard Public Schools Career Academy Application

Academy priority preference? (Please check one academy.)

**Business & Entrepreneurship**  
@ Millard South

**Business & Logistics Management**  
@ Millard North

**Education @ Millard West**

**Health Sciences @ Keith Lutz Horizon**

(Note: Academies will be offered based on student participation and availability of staff.)

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### Student Information

Name \_\_\_\_\_  
(Last) (First) (Middle) (Date of Birth)

Home Address \_\_\_\_\_  
(Street, Apt. No.) (City) (Zip Code) (Telephone Number)

Current Grade Level \_\_\_\_\_ Email \_\_\_\_\_ Home School: \_\_\_\_\_

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### Parent/Guardian Information

Name \_\_\_\_\_ Employer \_\_\_\_\_  
(Parent or Guardian)

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Name \_\_\_\_\_ Employer \_\_\_\_\_  
(Parent or Guardian)

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

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1. Identify the characteristics that would make you successful in this Academy. Reference the career information from your Personal Learning Plan (PLP). (Attach additional paper, if necessary)

2. Describe what you hope to achieve through participation in this Academy.

