

**OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL**

# Application for AFTER HIGH SCHOOL ADMISSION



Please complete the following application and the medical form.

When complete, return to Ocean County Vocational Technical School, 1299 Old Freehold Road, Toms River, NJ 08753. Attention: Adult Education.

**ATTACH A \$50 NON REFUNDABLE APPLICATION FEE. MAKE CHECK PAYABLE TO OCVTS**  
(Students graduating from high school this year are exempt)

**PLEASE PRINT ALL INFORMATION CLEARLY**

**OCVTS PROGRAM CHOICE:** \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name Middle Initial

Male  Female

\_\_\_\_\_  
Maiden Name

\_\_\_\_\_  
Mailing Address - Street / PO

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Home Phone Number (include area code) Cell Phone Number (include area code) Email Address

\_\_\_\_\_  
**Date of Birth Age City of Birth County of Birth State of Birth Country of Birth**

\_\_\_\_\_  
First date of entry in U.S. school, if born outside the United States or Puerto Rico:

\_\_\_\_\_  
High School Last Attended City State

\_\_\_\_\_  
Highest Grade Completed Date of High School Graduation (Month/Year)

Do you have a High School Equivalency Diploma (formerly GED)?  Yes  No

**High School Diploma or transcript needed at time of registration.**

Have you attended OCVTS, any school, college or university after leaving high school?  Yes  No

Schools Attended City & State Dates Attended (From/To) Date of Degree/Diploma

**Military Affiliation: Please select one of the following:**

**Student is Not Military Connected**

**Active Duty - Student is a dependent of a member of the Active Duty forces (full-time): Army, Navy, Marine Corps, Coast Guard.**

**National Guard or Reserve - Student is a dependent of a member of the National Guard or Reserve.**

How did you hear about OCVTS?  Presentation  Print Advertisement  Mail  Radio  Social Media  Other \_\_\_\_\_

**A criminal background check will be required for all students over the age of 18 in health career programs.**

**School Publicity Release**

I understand that I may occasionally be the subject of individual or group photographs or videos taken in my career area. I approve the use of my image in various media including, but not limited to newspapers, television and electronic media to be used in the promotion of programs at Ocean County Vocational Technical School.

*N.J.A.C. 6:3-2.2 allows educational, occupational, and military personnel access to school information. If you do not want this information shared, please initial here.* \_\_\_\_\_

By signing below I certify that all of the above information is correct and accurate. I accept all of the above agreements and agree to abide by all school policies, safety rules and procedures.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**TUITION REFUND POLICY**

Tuition refunds will only be given using the following schedule:

- Prior to the first day of class..... 100%**
- Within the first 15 days of class..... 75%**
- Within the first 25 days of class..... 50%**
- From the 25th - 40th day of class..... 25%**
- After the 40th day of class..... 0%**

\_\_\_\_\_ Please Initial Here



**SURVEY IN COMPLIANCE WITH  
AFFIRMATIVE ACTION PROGRAM (OPTIONAL)**

- |                                       |  |   |
|---------------------------------------|--|---|
| <input type="checkbox"/> White        | <input type="checkbox"/> Black                     | <input type="checkbox"/> Hispanic                   |
| <input type="checkbox"/> Puerto Rican | <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> Native American or Alaskan |
| <input type="checkbox"/> Cuban        | <input type="checkbox"/> Other                     | <input type="checkbox"/> No Response                |

# OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL

# Medical Information Form

All applicants interested in Child Care Professions, Employment Orientation Service Occupations, Culinary Arts programs or medical-related programs will be responsible for getting a Mantoux test for tuberculosis prior to the start of the school year.

**This form to be completed by Student**  
**Application will not be processed if incomplete.**

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Please complete the following medical summary for your medical file, including any existing condition by marking the appropriate boxes below. Explain any of the conditions in the explanation fields below. All information is confidential and will not in any way affect admission to OCVTS, as per section 504 of the rehabilitation Act of 1973.

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Anorexia            | <input type="checkbox"/> Contacts                  | <input type="checkbox"/> Learning Disability (Specify) | <input type="checkbox"/> Muscle Disorder (Specify)      |
| <input type="checkbox"/> Allergies (Specify) | <input type="checkbox"/> Diabetes                  | <input type="checkbox"/> Lyme Disease                  | <input type="checkbox"/> Nerve Disorder (Specify)       |
| <input type="checkbox"/> Asthma              | <input type="checkbox"/> Drug Allergy (Specify)    | <input type="checkbox"/> Excessive Bruising            | <input type="checkbox"/> Physical Handicap (Specify)    |
| <input type="checkbox"/> Back Problems       | <input type="checkbox"/> Eating Disorder (Specify) | <input type="checkbox"/> Glasses                       | <input type="checkbox"/> Respiratory Problems (Specify) |
| <input type="checkbox"/> Bulimia             | <input type="checkbox"/> Epilepsy                  | <input type="checkbox"/> Hearing Impaired              | <input type="checkbox"/> Vision problems (Specify)      |
| <input type="checkbox"/> Color Blind         | <input type="checkbox"/> Excessive Bleeding        | <input type="checkbox"/> Heart Problems (Specify)      |   |
| <input type="checkbox"/> Other _____         |  |  |   |

**Explain Checked Areas Here:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date of Last Physical Exam: \_\_\_\_\_ Date of Last Polio Immunization: \_\_\_\_\_ Date of Last Lead Blood Test: \_\_\_\_\_

**If you are taking any medication on a regular basis, please list medication name(s) below:**

MEDICATION NAME	EXPLAIN REASON FOR MEDICATION

**List required medical information below, If you do NOT have health insurance indicate by writing "NONE".**

Physician's Name \_\_\_\_\_ Office Phone (include area code) \_\_\_\_\_

Name of Health Insurance \_\_\_\_\_ Policy Number \_\_\_\_\_ Group Number \_\_\_\_\_

**In case of emergency, illness or accident to the student named above, the school is authorized to contact:**

Name \_\_\_\_\_ Business Phone (include area code) \_\_\_\_\_ Cell Phone (include area code) \_\_\_\_\_

Business Address \_\_\_\_\_

Name \_\_\_\_\_ Business Phone (include area code) \_\_\_\_\_ Cell Phone (include area code) \_\_\_\_\_

Business Address \_\_\_\_\_

Do you have any questions in regard to your health that you would like to discuss with the school nurse at the OCVTS Health Office?  Yes  No

**Medical Authorization Agreement**  
 I hereby verify that all medical information provided in this document is accurate. Any change will be reported to the school nurse as soon as possible. I hereby authorize the school nurse and/or appropriate school personnel to render whatever aid is deemed necessary for my safety and to share this information with appropriate school and medical personnel. In an emergency situation OCVTS has my permission to take me to the nearest hospital.

**Medical Authorization for Students Under 18 Years of Age**  
 In an emergency, illness or accident occurs to the above named student, I authorize the Ocean County Vocational Technical School to administer medication, render first aid and/or transport student to a medical facility for treatment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

## OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL

# Consumer Information

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The following is a list of information required by the US Department of Education to be disclosed to all students and/or parents of students. This consumer information can be obtained through the Financial Aid Office, in addition to the places listed below.

-Academic Programs and Cost of Attendance	OCVTS Website
	Financial Aid Office
-Accrediting, licensing, and approving agencies	Admissions Packet
-Campus Security Report and Policies regarding crimes	Admissions Office
	OCVTS Website
-Constitution and Citizenship Day – September 17th	OCVTS Website
-Completion/Graduation Rates and Transfer Out	Admissions Office
	OCVTS Website
-Description of available federal, state, local, private and Institutional financial need-based assistance programs	Financial Aid Office
-Drug and Alcohol Abuse Prevention	Policy Manual*
-Gainful Employment	OCVTS Website
	Financial Aid Page
-Grievance Policy	Policy Manual*
	Student Handbook
-Information regarding the Return of Title IV Funds	Policy Manual*
	Financial Aid Office
-Misrepresentation	Policy Manual*
-Net Price Calculator	OCVTS Website
-Requirements for officially withdrawing from school	Policy Manual*
-Rights and responsibilities of students receiving Title IV and other financial aid	Policy Manual*
	Financial Aid Info Sheet
-Rights Under Family Education Rights & Privacy Act	Policy Manual*
	Student Handbook
-Satisfactory Academic Progress	Policy Manual*
-School's Refund Policy	Policy Manual*
-Voter Registration	OCVTS Website

**There is a policy manual in the OCVTS Administration Office and at all OCVTS centers.  
Ocean County Vocational Technical School website: [www.ocvts.org](http://www.ocvts.org)**

# OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL

## AFTER HIGH SCHOOL

### Admission Information

#### APPROVAL

- New Jersey State Department of Education
- Middle States Association

#### ADMISSION REQUIREMENTS

1. All students must be eighteen years of age or older.
2. Programs require a high school diploma, or high school equivalency diploma (formerly GED).
3. Some programs may require an admissions examination.
4. Some programs may require a Mantoux test for tuberculosis.

#### ADMISSION PROCEDURES

1. Applications may be secured by calling our Admissions Office at 732.473.3100 ext. 3144.
2. The application must be completed and forwarded to our Admissions Office at 1299 Old Freehold Road, Toms River, NJ 08753. The application must be accompanied by a \$50 application fee, which is nonrefundable.
3. Some programs may require additional testing.
4. The applicant will be notified of acceptance into a particular program.
5. In most cases, it is recommended that the applicant visit a program prior to formal acceptance.

#### METHOD OF PAYMENT

1. The \$50 application fee is nonrefundable.\*
2. Tuition may be paid by either check, money order or credit card.
3. A \$100 nonrefundable deposit must be made at time of acceptance.

#### TUITION, FEES, BOOKS AND OTHER EXPENSES

You may inquire at the Admissions Office for tuition cost, current book prices and other miscellaneous expense rates.

#### GRIEVANCE POLICY

In an effort to resolve complaints as expeditiously as possible and keeping with federal/state antidiscrimination legislation, the Board of education adopts and hereby publishes the following grievance procedures:

Step 1. The grievant should report the incident to the building administrator or the district affirmative action officer, at which time the incident will be investigated. A conference will be scheduled with the grievant if necessary. If within five days the grievance is not resolved, proceed to Step 2.

Step 2. A written complaint should be submitted to the proper administrator, who will continue to investigate the incident. This administrator will respond, in writing, within 10 days. If the issue is not resolved, proceed to Step 3.

Step 3. The chief school administrator should be contacted within five days, at which time he/she will review the details of the grievance and respond within 20 days. If the grievance is not resolved proceed to Step 4.

Step 4. The grievant should appeal in writing to the Board of Education within five school days. The Board will review all documentation at a regularly scheduled board meeting. At this time a due process hearing will take place. The decision of the Board will be by a majority of its members. The Board will respond to the grievant in writing within five school days after the meeting.

#### GRADUATION/CERTIFICATION

Our school provides the applicant with instruction that has been approved by the New Jersey Department of Education. In order to graduate and be eligible to receive a certificate, the applicant must attend 90% of classes and maintain a passing average as listed for each course. All graduates are entitled to receive placement assistance. However, it is understood that neither graduation nor placement can be guaranteed.

#### GRADING POLICY

Performance reviews will be issued at least four times per year. If a student receives an INC (incomplete) for a marking period, arrangements must be made by the student to make up all the required work within two weeks. Failure to do so will result in an "F" grade. A 'no grade' may be issued when a student enters a vocational program late into a marking period. Special arrangements will be made to determine a final grade.

#### TRANSFER FROM PROGRAM TO PROGRAM

The student shall be encouraged to complete the program of instruction in which he/she has enrolled; however, if the student desires a transfer, the student will receive support from the program instructor and the counselor. An exit interview with an administrator or counselor will be made available before the final transfer is implemented. The student must also be able to attain the requirements and criteria of the curriculum in the transfer program. Transfers to a program with state mandated hours may not be possible at the time of the request. The records of the student who transfers to a new program will be updated and placed/sent out as requested. If a transfer is not possible, the student should refer to the withdrawal and refund policies.

\* Prices subject to change as approved by the OCVTS Board of Education.



Commission on Secondary Schools  
Middle States Association

#### Mission Statement

It is the mission of the Ocean County Vocational Technical School system to prepare students for job placement or further education leading to successful employment. We develop partnerships with affiliated schools, parents, business, industry and community agencies to create and deliver opportunities for students to participate in quality occupational programs and support services. These programs and services are designed to meet the needs of high school students and adult learners, as well as the requirements of employers, colleges, technical schools and the community. All students will achieve the New Jersey Core Curriculum Standards at all grade levels.

Our most important products are our quality graduates and our most important service is to provide them with skills for a lifetime. We measure our success by: enrollment in our programs; student attainment of marketable occupational skills; graduates capable and desirous of life-long learning; employer and graduate satisfaction; cost effectiveness of our total system; achievement of our graduates; and organizational and individual recognition and awards received.

It is the policy of the Board of Education of Ocean County Vocational Technical School not to discriminate in its technical programs, vocational opportunities, activities, employment practices or admission policies and practices on the basis of race, color, creed, religion, sex, ancestry, national origin, affectional and sexual orientation, disability or social or economic status. Lack of English language skills will not be a deterrent to admission to any program at Ocean County Vocational Technical School. Inquiries regarding affirmative action, discrimination (including Federal Title IX requirements), sexual harassment or equity should be directed to:  
Nancy Weber-Loeffert, Title IX/Affirmative Action Office, 732.240.6414 (ext. 3332)  
Thomas McInerney, Federal Section 504 Officer, 732.286.5660 (ext. 3412)  
Kevin Dineen, Americans with Disabilities Officer, 732.473.3100 (ext. 3123)

We are an Equal Opportunity Employer and Educator who fully and actively supports equal access for all people regardless of race, color, religion, gender, age, national origin, veterans status, disability, genetic information or testing, family and medical leave, sexual orientation and gender identification and expression. We prohibit retaliation against individuals who bring forth any complaint, orally or in writing, to the employer or the government, or against any individuals who assist or practice in the investigation of any complaint, or otherwise oppose discrimination.

## OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL

# Financial Aid Information

Our school has been authorized to participate in selected federal Financial Aid Programs such as the Pell Grant and Direct Loan programs. Other resources for financial assistance are the Private Industry Council, Division of Vocational Rehabilitation and the Veteran's Administration. To apply for federal financial aid complete the FAFSA online at [www.FAFSA.gov](http://www.FAFSA.gov). When completing the FAFSA online you must enter OCVTS's Title IV federal school code, 016934, in order for the school to receive the results. You must make an appointment with the Financial Aid Officer four days after completion of the FAFSA. For further information please contact the Financial Aid Office at 732.473.3100 ext 3139.

## APPLICATION

Students must file either the Free Application for Federal Student Aid (FAFSA) or the renewal Free Application for Federal Student Aid. Be sure to use the correct FAFSA for the school year you will be attending. Complete all sections of the FAFSA. To process the forms, tax returns must be linked to FAFSA online or official tax transcript from the IRS will be required. Other documentation may be required for verification as necessary.

## SUPPORTING DOCUMENTATION

**Official Tax Transcript:** You may be required to provide the appropriate official tax transcript from the IRS if the U.S. Department of Education selects your application for verification. You should be aware that financial aid awards might be adjusted after verification. If you do not provide the requested documents when asked, no financial aid will be made available.

**Documentation of Citizenship:** Students who are not U.S. citizens are subject to different regulations that may require supporting documentation. You will be contacted if this applies to you. U.S. citizens may also be requested to document their citizenship status.

**Selective Service:** Males born after July 1, 1960 must register with Selective Service to receive financial aid. The federal government may require students to verify registration. Financial aid cannot be disbursed without such verification.

**Social Security Number:** The federal government will confirm that the social security number on your FAFSA application matches other data in their files. Students whose records do not match will be required to verify their social security number before aid can be disbursed. If you have changed your name, be sure to notify the Social Security Administration. Your name with Social Security must match the name on the FAFSA before aid can be disbursed.

**Veterans:** Students who claim that they are veterans may need to verify their benefits status. Financial aid cannot be disbursed without such verification.

## STUDENT AID REPORTS

2-3 weeks after filing the FAFSA you will receive a Student Aid Report (SAR). If you do not receive this, call 319.337.5665 to check the status. Review the SAR for accuracy. If corrections are needed, make these on SAR Part II and follow instructions for processing or send to the Financial Aid Office with signatures for electronic processing.

## TYPES OF AID

A financial aid award package is the total amount of financial aid offered to a student by all sources. It is made up of components from one of the following three categories: scholarships, grants and loans.

**SCHOLARSHIPS AND GRANTS:** Scholarships and grants are types of gift aid that do not have to be repaid. They may take the form of Federal Pell Grants or scholarships.

**-Federal Pell Grants:** The Federal Pell Grant Program provides assistance to students who demonstrate financial need with no previous bachelor degree, according to economic criteria and program requirements established by the federal government. To be eligible, you must enroll in a degree or approved certificate/diploma degree program. Your Student Aid Report (SAR) contains the official result from the U.S. Department of Education.

**-Outside Scholarships and Grants:** You may be eligible for a specialized scholarship or grant from an outside agency. Some sources to explore are employers, unions, professional organizations, and community and special interest groups (Private Industry Council, Board of Social Services, Division of Vocational Rehabilitation, etc.) You must notify the Financial Aid Office if you receive funds from any of these sources. Many outside scholarships can be searched free of charge on the Internet. See the Financial Aid Officer or go to [www.fastweb.com](http://www.fastweb.com)

## TYPES OF AID (Continued)

**LOANS:** A part of your financial aid package may be a loan. A loan must be repaid. Therefore, when deciding whether to borrow, you should examine your need for assistance and your future ability to repay. Unlike consumer loans, student loans have longer terms of repayment and in most cases are not repayable until you leave school. Interest rates vary from program to program, but are usually lower than rates on loans made to the general public. The precise terms of the loan are contained in the promissory notes that borrowers must sign. The descriptions given here are summaries of terms available at the time of printing and are subject to change.

**-Subsidized Federal Direct Student Loan:** As part of your financial aid package, we may suggest that you borrow through the Federal Direct Student Loan Program. This loan is obtained from the Department of Education and is generally insured by the federal government. During the first year of undergraduate study, you may borrow up to \$3,500. The total amount borrowed in any year may not exceed the cost of education minus the family contribution and minus all other financial aid received that year. The interest rate is set each year and capped at 8.25 percent, but can be lower. Interest does not accrue and repayment does not begin until six months after you cease to be enrolled at least half-time.

**-Unsubsidized Federal Direct Student Loan:** The Unsubsidized Federal Direct Loan terms and conditions are essentially the same as the regular Direct loan, except the federal government does not pay the interest on the unsubsidized loan while you are in school. During the first year of undergraduate study you may borrow up to \$2,000. in unsubsidized loans as a dependent student, or up to \$6,000. in unsubsidized loans as an independent student. You must begin to repay interest 60 days after the first loan is issued. You can defer paying the principal on your loan if you are enrolled for the period of the loan. Also, interest can be "capitalized" (added to the principal) if you want. the interest rate set each year cannot exceed 8.25 percent, but can be lower.

## HOW A FINANCIAL AID AWARD PACKAGE IS DEVELOPED

In developing your financial aid award package, we begin by constructing a budget based on the estimated cost of education for the academic year. After analyzing your resources and calculating your need we determine your financial aid award.

### Constructing Your Budget

I. Your need for financial assistance is calculated as the difference between the estimated cost of your education and your resources. An expense budget includes tuition and fees, room and board, books and supplies, personal expenses, and a transportation allowance.

II. Colleges and Universities base their "financial need" analysis on the federal mandated formula called the "Federal Methodology" or FM. You can get a booklet describing the formula in detail by writing to:

FEDERAL METHODOLOGY  
FEDERAL STUDENT AID PROGRAMS  
P.o. Box 84, Washington, DC 20044  
You may also call 800.4.FED.AID

In summary, the FM indicates the amount you and your family are expected to contribute (family contribution) toward your education. It includes factors such as taxable and nontaxable income, assets (savings, etc.), benefits (for example, income from Social Security or unemployment insurance), family size, and the number of family members in college. The amount calculated is subtracted from the cost of attendance at OCVTS, yielding your financial need.

Cost of attending OCVTS  
Minus: Family Contribution (determined by FM),  
Equals: Financial Need

We try to "package" (combine financial need programs) - scholarships, grants and loans. The actual mix of your aid package varies according to need.

OCVTS is an Equal Opportunity School District. The Carl D. Perkins Vocational Technical Education Act provides partial funding for this publication.

The Financial Aid Office will give you individual assistance in filing the form. Please call for an appointment.

**For Additional Assistance Contact:  
OCVTS Financial Aid Office  
1299 Old Freehold Road, Toms River, NJ 08753  
732.473.3100 ext 3139**



Life's a Journey...Better Get Good Directions

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