

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 _____

Name _____ Home Phone _____

Cell Phone _____

Other Names Used _____ E-mail address _____

Permanent Address _____
(Street Address) (City) (State) (Zip)

Mailing Address _____
(Street Address) (City) (State) (Zip)

College(s) attended _____

I am applying to enter (you may select up to two programs, indicate 1st choice and 2nd choice):

Diesel Technology Program

Electrical Systems Technology Program

Industrial Millwright Program

Welding Technology Program

Instrumentation – must have AAS or Certification in Electrical Systems

*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

Work History

Starting with your present or most recent employment, list all employment you have had.

Employer Name _____ From _____ Mo/Year To _____ Mo/Year

Address _____ City _____ ST _____ Zip _____

Phone _____ Supervisor Name _____

Type of Business _____

Reason for Leaving _____

Employer Name _____ From _____ Mo/Year To _____ Mo/Year

Address _____ City _____ ST _____ Zip _____

Phone _____ Supervisor Name _____

Type of Business _____

Reason for Leaving _____

Employer Name _____ From _____ Mo/Year To _____ Mo/Year

Address _____ City _____ ST _____ Zip _____

Phone _____ Supervisor Name _____

Type of Business _____

Reason for Leaving _____

Education Background

Name of last high school attended _____

Location _____ Highest grade completed _____

Name/Location of college or trade school attended _____

Major _____ Highest Level completed _____

Mechanical Background/History

List any mechanical projects/accomplishments/achievements here: _____

Are you 18 years of age or older? Yes _____ No _____

Have you been convicted of any crime, misdemeanor or felony, (other than routine traffic offenses)? Yes _____ No _____

If so, list dates of convictions and nature of offenses _____

Are you a U.S. Citizen or alien legally authorized to work in the United States?

Yes _____ No _____

Current or Former Employer_____

A u t h o r i z a t i o n

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.

Name: _____
(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