

WISCONSIN TECHNICAL COLLEGE SYSTEM YOUTH APPRENTICESHIP (YA) DUAL ENROLLMENT GRANT

Youth Apprenticeship Grant Requirements:

1. In order to qualify for the grant, students must already be a YA at the time they complete the YA Dual Enrollment application.
2. The school-based coordinator, regional coordinator, and/or high school staff member signing the YA Dual Enrollment application is responsible for ensuring that the student is a YA student and the courses they are applying for meeting the YA-related instruction.
3. The grant will be expended on a first come, first serve basis.
4. The grant does NOT cover the cost of books.
5. The grant only pays for the tuition/fees for approved courses on the YA Dual Enrollment application.
6. Students are responsible for any additional course materials or supplies needed to tuition/books.
7. Students who drop or fail a class will not be required to pay BTC for the tuition/fees of the course.

Application Process: Please follow this carefully!

Students must complete ALL following steps in order to enroll at BTC:

1. Submit the YA Dual Enrollment Application to BTC Early College Specialist
2. Apply online at <https://www.blackhawk.edu/> and complete the *"Other High School Programs"* Application.
3. Complete and return the Consent/Release form attached.
4. Complete and submit the Statement of Understanding for attached.
5. Student will be admitted after completing steps 1-4.
6. Student will receive acceptance letter from BTC with a link to attend an orientation.
7. Student attends orientation and that is when a student enrolls in the course.

Questions should be directed to:

Alissa Grenawalt
Early College Specialist - Blackhawk Technical College
EMAIL: agrenawalt4@blackhawk.edu
PHONE: (608) 757-6983



WISCONSIN TECHNICAL COLLEGE SYSTEM
YOUTH APPRENTICESHIP (YA) DUAL ENROLLMENT GRANT APPLICATION

Student Name First, Middle, Last Student's Birthdate Mo./Day/Yr. Gender
M F Other

Parent/Guardian Name First, Last

Address Street, City, State, Zip, County

Student Phone Area/No. Student Email

Parent/Guardian Phone Area/No. Parent/Guardian Email

High School Student Attends & Projected Graduation Year School District in Which Student Resides

Semester to Which You are Applying: Spring Fall Summer Year: 20

Grade student will be in When Taking These Courses: 11 12

Blackhawk Technical College Course Name Course Number Number of Credits High School Approval (Y or N)

Table with 4 columns: Course Name, Course Number, Number of Credits, High School Approval (Y or N)

Student Signature - In Signing this Document, I acknowledge the following: As a student enrolled in a Blackhawk Technical College course, I will be required to abide by the Blackhawk Technical College student policies and guidelines...

Student Signature - Required Date Signed Mo./Day/Yr.

Parent/Guardian Signature - In Signing this Document, I acknowledge the following: My child, as an enrolled student in a Blackhawk Technical College course, will be required to abide by the Blackhawk Technical College student policies and guidelines...

Parent/Guardian Signature - Required Date Signed Mo./Day/Yr.

School District and/or Youth Apprenticeship Coordinator Signature - In Signing this Document, I acknowledge that this student is a Youth Apprentice student and the courses approved (above) align with the student's YA related coursework...

School District Administrator or YA Coordinator Signature, School District - Required Date Signed Mo./Day/Yr.



Blackhawk Technical College



Confidential Information Release Authorization *(To be Returned to BTC)*

I, _____, BTC Student ID# _____, authorize

Blackhawk Technical College to release information concerning the following student records:
(check all that apply)

_____ Any and all records

_____ Academic records: grades, transcripts, admissions records, course schedule, etc.

_____ Student account records

_____ Other records (specify): _____

Release the designated information to:

_____ Parents or Guardian (Enter their names) _____

_____ High School Staff at _____

I further authorize Blackhawk Technical College representatives to discuss my student records with the above named designee(s). I will not hold Blackhawk Technical College liable under the Family Educational Rights and Privacy Act (FERPA) for releasing my student records to the above named designee(s). This release will remain in my record and will be in effect for one year from the date indicated below.

(Print Student Name)

(Student Signature)

Dated: _____

Office of the Registrar

6004 S County Rd G • PO Box 5009 • Janesville, WI 53547 • (608) 757-7654 • Fax (608) 743-4407



For more information, please contact:
admissions@blackhawk.edu • (608) 757-7710 • blackhawk.edu

BTC is an EO/AA educator/employer. For more information, go to blackhawk.edu



Blackhawk Technical College



Statement of Understanding *(To be Returned to BTC)*

After reading the BTC student policies and procedures (found at <http://catalog.blackhawk.edu/policies/>), sign and submit this page via email to the contact information below.

I have read and understand the policies and responsibilities as a student at Blackhawk Technical College taking college classes. I agree to follow the guidelines, expectations, and policies set forth by the Blackhawk Technical College and the school district.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Email this signed form (along with the Consent/Release form) to the Admission Office at: admissions@blackhawk.edu

It could also be mailed to the following address:

Blackhawk Technical College
Attn: Admission Office
6004 S. County Rd. G
Janesville, WI 53547-5009



For more information, please contact:
admissions@blackhawk.edu • (608) 757-7710 • blackhawk.edu

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