



WestCal Academy®

1299 University Avenue • Suite 201 • Riverside, CA 92507

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Info@WestCalAcademy.com

Application For Admission

CONDITIONS: WestCal Academy® is a 501(C)(3) nonprofit education organization that offers clients the opportunity to engage in multiple career explorations through the WestCal® Career Pathway Program. The client is expected to follow regulations and procedures that apply to all participants. This enrollment approval form must be presented when the client initially files an application for admission to WestCal Academy®. No client under the age of 18 may enroll in WestCal Academy® without the consent of their parent / guardian. In some cases, a client may be a ward 18 or over and require the approval of a parent / guardian. *WestCal Academy® and its collaborators assume no responsibility for the supervision of minor clients (i.e., clients under 18 years of age) or wards inside or outside the classroom setting. Parents / guardians are responsible for ensuring that their children / wards are appropriately supervised before class / program begins, after class / program finishes, or when a class is cancelled and/or dismissed early.*

CLIENT INFORMATION

Client Name: _____ Client Birth Date: _____ / _____ / _____
 Last First Middle Month Day Year

Client Address: _____
 Street Apartment Number City State ZIP

Client Home Phone Number: _____ Client Social Security Number: _____

Client E-mail Address: _____ Client Mobile Phone Number: _____

Client Grade Level (K-12, College): _____ Name of Current School: _____

FOR CLIENT: I authorize the release of my transcript information to my school. I authorize WestCal Academy® to process my enrollment for all academic institutions for the purpose of processing and/or continuing my involvement with WestCal Academy®. I authorize the release of my transcript information to my school. I authorize WestCal Academy® to register me for all WestCal Academy® pre-apprenticeship and apprenticeship programs with the California Department of Industrial Relations / Division of Apprenticeship Standards (DIR/DAS) and the United States department of Labor (USDOL). I authorize WestCal Academy® to register me for any pre-apprenticeship and apprenticeship programs with the United States department of Labor (USDOL), California Department of Industrial Relations / Division of Apprenticeship Standards (DIR/DAS), including any pre-apprenticeship and apprenticeship program registered in any state or territory of the United States of America and throughout the world. I authorize WestCal Academy® to refer me for all local, county, state, and federal funding opportunities, including student services and vocational training with I-Train, California Employment Training Provider List (ETPL), Workforce Development Boards, SkillBridge, including all government and private foundation grant opportunities.

 Print Name of Client Client Signature Date

FOR APPLICANTS WHO ARE MINORS: FOR PARENT / GUARDIAN: I authorize my child / ward to enroll with WestCal Academy®. I understand that my child / ward will not be afforded any special status or supervision, because of their minor / ward status while enrolled in WestCal Academy®. I authorize WestCal Academy® to process my child's / ward's enrollment for all academic institutions for the purpose of processing and/or continuing my child's / ward's involvement with WestCal Academy®. I authorize the release of my child's / ward's transcript information to my child's / ward's school. I authorize WestCal Academy® to register my child / ward for any pre-apprenticeship and apprenticeship programs with the United States department of Labor (USDOL), California Department of Industrial Relations / Division of Apprenticeship Standards (DIR/DAS), including any pre-apprenticeship and apprenticeship program registered in any state or territory of the United States of America and throughout the world. I authorize WestCal Academy® to submit my child's / ward's information for any pre-apprenticeship and apprenticeship program registered with DIR/DAS and USDOL. I authorize WestCal Academy® to refer my child / ward for all local, county, state, and federal funding opportunities, including student services and vocational rehabilitation with I Train, California Employment Training Provider List (ETPL), Workforce Development Boards, SkillBridge, including all government and private foundation grant opportunities.

 Print Name of Parent / Guardian Parent / Guardian Signature Date

 Parent / Guardian Work Phone Number Parent / Guardian Home Phone Number Parent / Guardian E-Mail Address

ENROLLMENT INFORMATION

Term: Fall / Cohort: _____ Winter / Cohort: _____ Spring / Cohort: _____ Summer / Cohort: _____ Year: _____

WESTCAL ACADEMY® APPROVAL (to be completed by the President or designee)

Approved to Attend Not Approved to Attend _____
 Print Name Signature Date

Reason(s) for Refusal: _____
 Notes: _____

