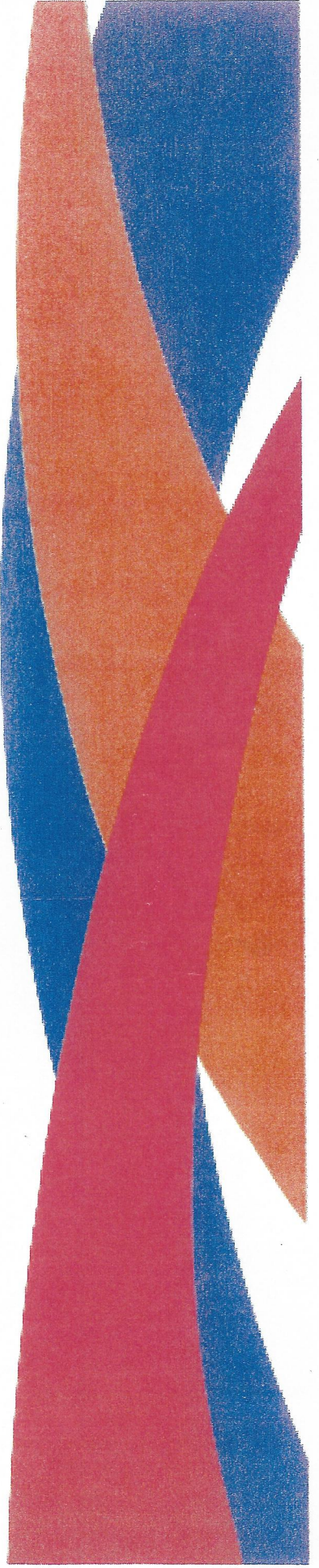


**GEORGIA PIEDMONT TECHNICAL  
COLLEGE**

**MOVE ON WHEN READY  
APPLICATION PACKET**





**GEORGIA PIEDMONT  
TECHNICAL COLLEGE**

## MOWR STUDENT CHECKLIST

GPTC Application for Admissions (confirmation page printout)

Acceptable SAT, ACT, ACCUPlacer test scores

A copy of the student's signed social security card

GPTC Parent Permission Letter

GPTC MOWR Student Participation Agreement

MOWR Financial Aid Steps (print confirmation page)

<https://gacollege411.org/Financial Aid Planning/ default.aspx>

**Financial Aid Student Support # 1-800-505-4732**

**Gacollege411 technical support # 1-800-468-4927**

GPTC Textbook Form



**GEORGIA  
PIEDMONT**  
TECHNICAL COLLEGE

# Georgia Piedmont Technical College

## Testing Information

**Clarkston Campus**

**Assessment Center A-027**

**495 North Indian Creek Drive**

**Clarkston, GA 30021**

**Monday- Thursday**

**9:00am- 4:00pm**

**Walk-In's are welcome**

**Newton Campus**

**Assessment Center B-206**

**16200 Alcovy-Jersey Road**

**Covington, GA 30015**

***Scheduled Appointment only***

**Must arrive 15 minutes early**

**Monday- test starts at 4 pm**

**Tuesday- test starts at 9 am**

**Wednesday- test starts at 9 am**

**Thursday- 1<sup>st</sup> session starts at 12:30 pm**

**2<sup>nd</sup> session starts at 4 pm**

# MOWR TEST SCORE REQUIREMENT CHART

## Georgia Piedmont Technical College

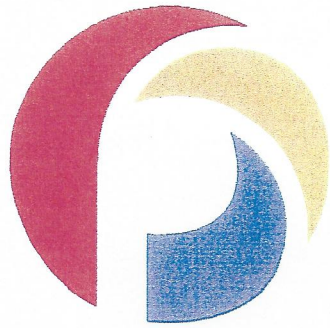
ASSET*	WRITING	READING	PA/N	ALGEBRA
Degree	41	41		41
Technical	36	38	32	

COMPASS*	WRITING	READING	PA/N	ALGEBRA
Degree	62	79		37
Technical	38	70	27	

ACT	WRITING	READING	PA/N	ALGEBRA
Degree	16	17	19	
Technical	13	15	15	

SAT	WRITING	READING	PA/N	ALGEBRA
Degree		460	440	
Technical		430	400	

\*Asset and Compass will be replaced by Accuplacer beginning October 1, 2016.



**GEORGIA  
PIEDMONT**  
TECHNICAL COLLEGE

# **GPTC Deadlines**

## Testing

Summer: March 31<sup>st</sup>

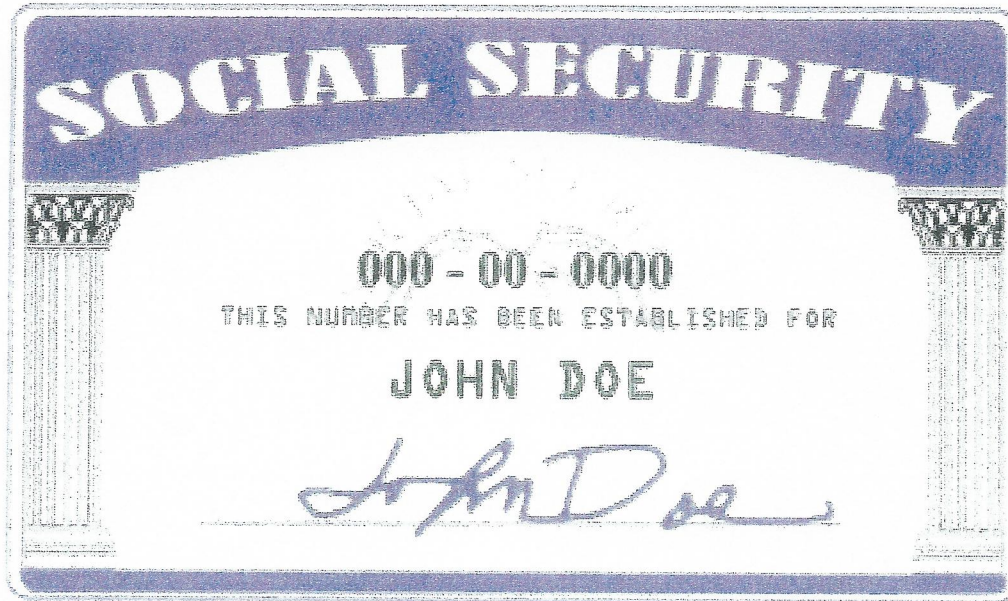
Fall: May 5<sup>th</sup>

## Admission Packets

Summer: April 15<sup>th</sup>

Fall: May 20<sup>th</sup>

Please ensure the copy is **SIGNED**.



## Part I: To be Completed by Student and Parent/Guardian

(Part II to be completed by a high school official and Part III to be completed by postsecondary institution official)

Send a copy of this completed application to: GSFC, 2082 East Exchange Place, Tucker, GA 30084.

Student \_\_\_\_\_  
Last First Middle

Student's SSN \_\_\_\_\_ Student's Date of Birth \_\_\_\_\_

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

Telephone Number (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

School Currently Attending in Georgia:

- Public High School
- Private High School
- Home Study Program
- Other \_\_\_\_\_

Name of High School \_\_\_\_\_

Please read the following certification statement and sign below:

### CERTIFICATION, AUTHORIZATION, AND AGREEMENT

*I/we certify that the information reported above and on any other document or writing in connection with this application is true, correct and complete to the best of my/our knowledge. I/we authorize release and exchange of information between the Georgia Student Finance Commission, educational institutions, and educational state agencies, and agree that such information exchanged may include financial, enrollment, academic status, identification, legal residency, and location information necessary to assure proper administration of this program. I/we understand that any willfully false statements made for the purpose of enabling the student to establish eligibility for, or to wrongfully receive, state student aid funds, may be subject to fine or imprisonment, or both, herein may result in prosecution for violation of Georgia Laws 1978, pp. 1249, 1310, which states that false swearing shall be punished by a fine of not more than \$1,000 or imprisonment for not less than one or more than five years or both. I/we also understand that any refund of fees, paid under Part III below, resulting from withdrawal from a postsecondary institution, will be returned to the Georgia Student Finance Commission. Further, I/we authorize the postsecondary institution, named in Part III, to forward a transcript of grades to the high school, named in Part II, for the school term(s) named in Part III.*

*I agree to allow the postsecondary institution I attend to send my high school or home study program one academic transcript at the end of the term.*

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Print Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Print Parent/Guardian's Name



Part II: To be Completed by the High School or Home Study Program

Student Name \_\_\_\_\_ SSN \_\_\_\_\_ School Term \_\_\_\_\_
Classified as a Dual Credit Enrollment student and scheduled to graduate in \_\_\_\_\_ (mm/yyyy)

Grade Level: [ ] Freshman (9th) [ ] Sophomore (10th) [ ] Junior (11th) [ ] Senior (12th)

Currently Attending in Georgia:

- [ ] Public High School Name of High School \_\_\_\_\_
[ ] Private High School
[ ] Home Study Program High School ETS/CEEB Code (if accredited) \_\_\_\_\_
[ ] Other \_\_\_\_\_

The student and the parent/guardian have been advised about participation in the Move On When Ready Program and the pursuit of postsecondary coursework and credit while in high school. It is understood by all that the attempted postsecondary courses/credit will be part of the student's academic history. The postsecondary course and credit is to be substituted for the following high school courses and part of the high school transcript. Refer to the Move On When Ready Approved Course Directory found at www.GAfuture.org for available offerings.

Table with 2 columns: High School Course Name, High School Course Number

Print Name of Certifying Official \_\_\_\_\_ Signature of Certifying Official \_\_\_\_\_ Date \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Part III: To be Completed by the Postsecondary Institution Term/Year \_\_\_\_\_

Postsecondary Institution: \_\_\_\_\_ Title IV School Code: \_\_\_\_\_

Table with 4 columns: Postsecondary Institution Course Name, Course Number, Hours, Campus

Campus \* (1)Online (2)High School (3)Postsecondary Institution (4)Other

Print Name of Postsecondary Official \_\_\_\_\_ Signature of Postsecondary Official \_\_\_\_\_ Date \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_





Parent Permission Letter

Move On When Ready
495 North Indian Creek Drive
Clarkston, GA 30021
404-297-9522

GPTC Student ID#: 900 \_\_\_\_\_

PART 1: TO BE COMPLETED BY STUDENT

Gender: [ ] Male [ ] Female Are you a U.S. Citizen? [ ] Yes [ ] No If no, nation of citizenship:

Ethnic/Racial Group: [ ] American Indian [ ] Asian [ ] Black [ ] Hispanic [ ] White [ ] Other

Last four digits of SS#: [ ][ ][ ][ ] Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Contact Number: \_\_\_\_\_

High School Name: \_\_\_\_\_

Current Grade: [ ] Freshman [ ] Sophomore [ ] Junior [ ] Senior GPA: \_\_\_\_\_

High School Counselor: \_\_\_\_\_

I currently have an account on GACollege411: [ ] Yes [ ] No

I have taken the SAT: [ ] Yes [ ] No

I have taken the ACT: [ ] Yes [ ] No

**PART II: TO BE COMPLETED BY STUDENT & PARENT**

The high school counselor and GA Piedmont Technical College representative must approve all college courses taken. The courses taken will reduce the length of time required to complete the college program after high school graduation if the courses are completed satisfactorily and accepted as transfer credit at the receiving institution of the student's choice.

Parents and students must initial each item indicating that they have read it, understand it, and agree to abide by the terms set forth in the MOWR program outlined below.

	Parent's Initials	Student's Initials
The student must meet the minimum GPA requirement (varies by program), have a good attendance record and an acceptable behavior record at the high school. The student must maintain a GPA of 2.0 or better in all college course work taken and uphold good attendance and behavior.		
The high school student must meet admissions criteria of GA Piedmont Technical College including an acceptable SAT/ACT or ASSET test score (varies by program of study).		
The high school counselor and the GPTC representative must approve all college courses taken by the high school student.		
If the high school student is not taking college classes at their high school, the student must provide their own transportation to and from GPTC. The Clarkston Campus is accessible by MARTA busses and trains.		
GA Piedmont Technical College does not have any type of meal plan for any students.		
Each eligible high school (public, private or home study program) must complete a MOWR Program Participation Agreement as provided by the Georgia Student Finance Commission (GSFC) in order to participate in the program.		
Participation in any MOWR program does not exempt anyone from the Georgia High School Graduation Test.		
The student agrees that he/she will discuss any concerns regarding class weight with their high school counselor BEFORE participating in the MOWR program.		
The parent/guardian and the student understand that no preferential treatment will be given to the high school student while participating in the MOWR program. MOWR students are held to the same academic and behavioral standards as any other GA Piedmont Technical College student.		
MOWR students are NOT eligible for other financial aid (i.e., loans, Pell, etc.).		
Students may incur expenses for course related fees and supplies required for a particular course or optional fee charged by the postsecondary institution. If the postsecondary institution provided the textbooks through a <u>lending program</u> , the student may be charged a lost or damaged book fee if the book is not returned in the required condition.		
The state Board of Education Rule 160-5-1-18: Competitive Interscholastic Activities in Grades 9-12: No-Pass/No Participate applies to courses taken at GA Piedmont Technical College through the MOWR program.		
By signing this form the parent/guardian and the student authorize GA Piedmont Technical College to notify the school system of grades earned each semester.		
After graduating from high school, the student understands that it is his/her responsibility to request an official transcript be sent from GA Piedmont Technical College Registrar's Office to whatever postsecondary school he/she attends.		
Student agrees to maintain regular contact with high school coordinator including but not limited to regularly checking their GPTC e-mail and phone messages and responding to action calls as necessary.		

We certify that the foregoing information contained in this application is true and correct. We understand that misrepresentation or omission of information will be sufficient cause for rejection or dismissal.

**Authorization:**

We acknowledge that entering our names on this form is the equivalent of our signatures. By submitting this form we authorize the Georgia Piedmont Technical College Admissions Office to process this request.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FERPA Clause:**

The Family Educational Rights and Privacy Act (FERPA) of 1974, as amended, seeks to guarantee both a student's rights of access to records and the confidentiality of student information. In accordance with federal law and College policy, we generally will not share student academic information (apart from directory information) with third parties, including parents or spouses, without student consent.

This signed document allows students to grant parents, guardians, spouse, and/or other access to their education records maintained by Georgia Piedmont Technical College. All permissions granted will stay in effect until revoked by student.

Note: This clause pertains to all academic records, including financial information associated with those records. This form does not pertain to medical records or inquires. Please return this form to the Office of the Registrar, 495 N Indian Creek Drive Clarkston, GA 30021; FAX (404) 294.3424; or e-mail scanned copy to [registrar@gptc.edu](mailto:registrar@gptc.edu).

NAME (LAST, FIRST) \_\_\_\_\_ SSN (LAST 4 DIGITS) \_\_\_\_\_ 900- \_\_\_\_\_  
GPTC STUDENT ID NUMBER

- I AGREE to the permissions as stated in the FERPA Clause
- I DO NOT agree to the permissions as stated in the FERPA Clause

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

As set forth in the student catalog, Georgia Piedmont Technical College does not discriminate on the bases of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, disabled veteran, veteran of the Vietnam Era, or citizenship status (except in those special circumstances permitted or mandated by law).

**PART III: TO BE COMPLETED BY GPTC HIGH SCHOOL COORDINATOR**

Student Participation Agreement Submitted:

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Year and term student plans to enter college:

Year: 

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 Term:  Fall  Spring  Summer