

APPLICATION FOR ADMISSIONFiber Optic Technician



UA Hope-Texarkana is an equal opportunity institution and will not discriminate on the basis of race, color, religion, sex, national origin, age, disability, or unlawful factors in employment practices or admission and treatment of students. Some information is obtained for the sole purpose of state reporting and/or ensuring the college is reaching all segments of the population.

Applying is easy! Simply follow these steps.

STEP ONE: PROVIDE REGISTRANT INF	ORMATION			
Please print.			*Required Fields	
Social Security Number*:	Date of Birth* (MM	Date of Birth* (MM/DD/YYYY):		
Name*:First*	Middle	dle Last*		
Mailing Address*:	City	State	Zip	
E-mail Address*:				
Phone Number*:				
Do you have a valid driver's license?* □ No [☐ Yes. Attach a copy of the d	river's license) .	
Residency/Citizenship Status*: ☐ Permanent U☐ Non-Perman	JS Resident/US Citizen nent Resident/Non-US Citizen			
Are you currently employed?* ☐ No ☐ Yes	s. If yes, who is your employer	?		
Gender: □ Female □ Male				
Ethnicity: ☐ Asian or Pacific Islander ☐ American Indian/Alaskan Native ☐ Other			spanic	
Emergency Contact Name:	Phone:	:		
STEP TWO: PROVIDE AUTHORIZATION	S AND ACKNOWLEDEME	NTS		

With my signature below I hereby:

☑ Verify that I have read and understand the Fiber Optic Technician Program Guidelines. Community Education representatives have answered any questions I have concerning the guidelines and how they apply to me to my satisfaction.

- ✓ Verify I have a valid driver's license and acknowledge that I am unable to lawfully operate a vehicle as required during training without a valid driver's license and to do so may subject me to fines and legal consequences including the full financial responsibility for injuries, vehicle and other damages that may occur while operating a vehicle. I also agree to immediately inform my instructor of a suspended license.
- ☑ Verify I am able and willing to lift/carry up to 50 lbs. without assistance
- ☑ I understand that after I graduate and/or withdraw from the program, I will be required to provide employment information for a minimum of 18 months. This information is vital for assessing the effectiveness in achieving positive outcomes for individuals served by the grant.
- Acknowledge that hiring criteria varies among employers; therefore, factors such as a felony conviction, a poor driving record, a conviction related to a controlled substance or other factors could limit or prohibit employment in some cases even after the successful completion of the training program.
- Authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Arkansas Fiber Academy and its affiliates, whether the said records are public, private, or of a confidential nature.

Printed Name of Applicant:	
Signature of Applicant:	Date:

STEP THREE: SUBMIT YOUR COMPLETED APPLICATION FOR ADMISSION FORM

Submit a fully completed Fiber Optic Technician Program Application for Admission to Community Education along with a copy of your:

OSHA 10 Certification Valid Driver's License CPR First Aid Certification

UAHT can provide OSHA 10 and CPR certification classes to qualifying program participants.

Fax: (870) 722-8297

In-Person: Any UA Hope-Texarkana, Hope Campus Location

Mail: University of Arkansas Hope-Texarkana, 2500 S Main St, Hope, AR 71801