

APPLICATION for ENROLLMENT

Complete application in blue or black ink, enclose \$25 non-refundable application processing fee, sign the Agreement below, and mail to: PCAI Admissions 415 Southshore Parkway Durham, NC 27703

NAME _____ MALE FEMALE
First Middle Last

STREET ADDRESS _____
Apartment Number

CITY/COUNTY _____ STATE _____ ZIP CODE _____

HOME PHONE () _____ CELL PHONE () _____

EMAIL ADDRESS _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____

Please identify a person Pinnacle Culinary Arts Institute might contact in case of an emergency:

_____ PHONE () _____
First Middle Last

If the address provided is NOT a permanent address, please provide your permanent address:

STREET ADDRESS _____
Apartment Number

CITY/COUNTY _____ STATE _____ ZIP CODE _____

Were you referred to us by a current student or alumni? If so, please provide his/her name below:

Please indicate citizen status:

- United States Citizen
 Permanent Resident with Alien Reg. No: _____
 Other (If, "Other", please indicate country of birth and country of current citizenship): _____

How would you describe yourself? (Optional)

Pinnacle Culinary Arts Institute is required to compile, maintain and submit the following information to federal/state agencies to evaluate civil rights compliance.

- AMERICAN INDIAN or ALASKAN NATIVE ASIAN BLACK or AFRICAN AMERICAN
 NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER WHITE HISPANIC (ANY RACE)
 I RESPECTFULLY DECLINE TO INCLUDE THIS INFORMATION

Marital Status: (Optional)

- SINGLE MARRIED DIVORCED WIDOWED SEPARATED

PROGRAM OF INTEREST

Please specify the program(s) in which you are interested in enrolling:

CULINARY ARTS / PASTRY ARTS (12 weeks)

CULINARY ARTS / PASTRY ARTS / CULINARY MANAGEMENT (20 weeks)

When do you anticipate enrolling at Pinnacle Culinary Arts Institute? (Examples: Spring 2014, Fall 2014, etc.)

First choice

Second choice

EDUCATIONAL INFORMATION

Please check the box that best corresponds to your highest level of education completed.

CURRENTLY IN HIGH SCHOOL

Expected Date of Graduation

HIGH SCHOOL DIPLOMA *or*

GED

Year of Graduation

School Name

School Location

TECHNICAL DEGREE

Year of Graduation

School Name

School Location

ASSOCIATE'S DEGREE

Year of Graduation

School Name

School Location

BACHELOR'S DEGREE

Year of Graduation

School Name

School Location

GRADUATE DEGREE

Year of Graduation

School Name

School Location

WORK EXPERIENCE

Whether or not you have worked in the food service industry, please complete the following or include résumé.

COMPANY

DATES OF EMPLOYMENT

POSITION(S) HELD

COMPANY	DATES OF EMPLOYMENT	POSITION(S) HELD
_____	_____	_____
_____	_____	_____
_____	_____	_____

AGREEMENT

Any information you provide will be used only by the appropriate office and will not prejudice your application. I certify that this information is true and complete to my knowledge. Falsification of information on this application could jeopardize acceptance and enrollment to Pinnacle Culinary Arts Institute.

Signature of Applicant

Date