



MERIDIAN TECHNOLOGY CENTER

1312 South Sangre Road Stillwater, OK 74074 www.meridiantech.edu 405-377-3333

2025-2026 New High School Student Application for Admission

(Please print legibly in blue or black ink—please write dark where copies are legible.)

High School Counselor

Please include:

- Transcript
- Assessments (PreACT, etc. (if applicable))
- Attendance

Homeschool/Virtual School Add'l Items

- Affidavit of Homeschooling
- Proof of Age (Birth Cert. or DL/Permit)
- Immunization Record
- Proof of enrollment on virtual school letterhead (Virtual students only)
- Proof of Residence (water or elec. bill w/ physical location of address)

Legal First Name _____ Middle Name _____ Last Name _____

Nickname _____ T-Shirt Size S M L XL 2XL 3XL 4XL

Date of Birth _____ Place of Birth _____ Sex: F M
(MM/DD/YYYY) (city and state)

Student Cell# _____ Student Email _____

Mailing Address _____ City _____ State _____ Zip _____

Current High School _____ Current Grade (circle one) **9** **10** **11**
(Seniors will need to complete Next Step Scholarship appl if graduating May 2025)

Has a member of your family attended Meridian? YES or NO If yes, who? Parent Sibling Other

Primary Choice Program (see pg. 4) _____

(Optional) Secondary Choice Program (see pg. 4) _____
(A second choice is not required if you only want your 1st choice)

I Prefer to Attend: AM (7:50-10:40 AM) or PM (12:45-3:35 PM) Willing to attend either session? YES or NO
(Please keep in mind your class commitments: band, sports, etc. Switching sessions after accepted is generally not possible.)

Releases, Policies and Procedures

I hereby give my permission for my child's high school to release grades, attendance records, and achievement test scores to Meridian Technology Center.

I also give permission for the high school to release confidential records contained in my child's Individualized Education Program (IEP), 504 Plan, or Health Plan, if applicable. I understand that all records are confidential and will only be reviewed by Meridian staff who serve my child. I understand that parents or guardians of individuals under 18 years of age have the right to request records. Individuals 18 years of age or over must give permission for information to be released to parents, according to the Family Educational Rights & Privacy Act (FERPA).

A student enrolled at Meridian Technology Center gives the school permission to utilize the student's photograph and name in public relations efforts and promotional materials including but not limited to social media, the website, radio promotions, newspaper and videos unless written notice is given to the Career Planning Center each school year that permission is withheld.

Upon approval for acceptance in a program at Meridian Technology Center, the applicant and the parent/guardian do hereby agree to comply with Board-approved policies and procedures including, but not limited to, the student handbook.

Signature of Student

Signature of Parent/Guardian

Date

Applications will not be considered for acceptance until completed in full and signed. Completion of this application does not guarantee admission.

PARENT/GUARDIAN PERMISSION FOR EXCURSION

The undersigned, a parent or guardian of _____, a student at Meridian Technology Center, requests that the said student be allowed to participate in field trips within the Meridian Technology Center district. In the case of an Out-of-District Excursion, a permission form will be given to the student requesting permission from parent or guardian.

Signature of Parent/Guardian

Date

Meridian Office Use ONLY		Student ID _____	Date Received at MTC: _____		
Accept _____	Bio _____	Interest _____	Notes _____	Health _____	Bio Lvl _____
WL _____	Place of birth _____	Internet _____	Add'l Med Info _____	Diabetes _____	OK Lvl _____
Declined _____	Address _____	Photo _____	Allergies _____	Emerg _____	Test/ACT _____
Denied _____	Application _____	Excursion _____	Release Info _____	Holds _____	Registration _____
Disposition _____	1 st _____	Workkeys _____		Status Ind _____	Code _____
	2 nd _____	New Enrollment _____	App/Student _____	Program _____	Session _____
	Emergency _____			An Grad Date _____	Start Date _____
			Advisors _____		Post to Bill _____

WORKKEYS ASSESSMENTS

Meridian students take the ACT WorkKeys Assessments as part of their training program. WorkKeys scores are uploaded to the Oklahoma Department of Commerce and the Oklahoma Department of Employment Security (Oklahoma Job Link/Workforce Oklahoma). By signing below, I give permission to release mine or my minor child's results to those agencies. I also understand that results will be stored in a secure database and will only be accessible to employers if I give the certificate number to an employer.

Signature of Parent/Guardian or Adult Student

Date

PARENT/GUARDIAN INFORMATION

In order for us to be able to communicate with parents and guardians of our minor students, any information provided in this section will be used to contact these people. Messages will only include topics pertaining to the student's education at Meridian.

Parent/Guardian 1 First Name _____ Last Name _____

Cell # _____ Work # _____ Relationship to student _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address _____

Parent/Guardian 2 First Name _____ Last Name _____

Cell # _____ Work # _____ Relationship to student _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address _____

FOR STUDENTS 18 YEARS OF AGE AND OLDER—Release of student information to parent or guardian

I hereby give my permission to Meridian Technology Center to release information about my grades and/or attendance records to my parent(s) or guardian(s) listed above. This release remains in effect until revoked in writing.

Signature of Adult Student (18+ years of age)

Date

TRANSPORTATION

While transportation is available, students and parents are responsible for transportation choices if district transportation is not selected or utilized.

PERMISSION FOR EMERGENCY MEDICAL CARE

Please only mark one box, sign and date below.

Due to philosophical or religious beliefs, or for medical reasons, I decline Meridian Technology Center from seeking any medical treatment for myself or my minor student while at school or on a school-sponsored activity. I understand the possible consequences for such decision.

I hereby give permission to Meridian Technology Center to obtain emergency medical care for any serious injuries incurred by myself or my minor student while at school or on a school-sponsored activity. I understand billing for said medical care will be sent to me.

Signature of Parent/Guardian or Adult Student

Date

MEDICAL INFORMATION

Emergency contact (other than parent/guardian) _____ Relationship _____

Cell# _____ Home # _____

Is student diabetic? YES NO If Yes, please attach your diabetic plan.

Is the student currently taking medications? YES NO If yes, list: _____

Does the student have any allergies? YES NO If yes, list: _____

Does student carry an Epi-pen for allergies? YES NO

Has student had a tetanus shot in the past 10 years? YES NO

Programs Available

Please place a 1 next to your primary choice and a 2 next to your secondary choice (if applicable)

- Air Conditioning & Refrigeration**
- Automotive Technology**
- Biomedical Sciences – STEM Academy** **Must complete additional application materials (only 9th and 10th graders can apply)*
- Business Technology – Administrative Assistant**
- Business Technology – Entrepreneur**
- Carpentry**
- CNC Machining**
- Collision Repair Technology**
- Computer Aided Drafting (CAD) – Architectural**
- Computer Aided Drafting (CAD) – Mechanical**
- Cosmetology** **Must complete additional application materials as well as pay the kit fee of approximately \$500 after accepted*
- Criminal Justice – Legal Systems and Policing**
- Criminal Justice – Investigation and Emergency Management**
- Culinary Arts**
- Digital Media – 3D Animation and Motion Graphics**
- Digital Media – Digital Video Advanced Technician**
- Digital Media – Graphic Design Specialist**
- Digital Media – Web Designer**
- Early Care Education/Teacher Prep**
- Electrical Technology**
- Health Careers** *(*Must complete additional application materials);*
Please number the following list in the order in which you prefer to take courses. Please understand that we will try to level classes so this may not be the exact order in which you choose.
 - Health Careers – Medical Assisting
 - Health Careers – Phlebotomy/Intro to Emergency Medical Response
 - Health Careers – Pre-Nursing
 - Health Careers – Pre-Rad Tech/Limited Licensed Radiology Technician
 - Health Careers – CORE (this must be taken with another career path in order to graduate as a part time student in one year)
- Industrial Technology**
- Information Technology – Cyber Crime Specialist**
- Information Technology – Cyber Security & Network Defense Analyst**
- Information Technology – IT Programming Specialist**
- Information Technology – Network PC Support Specialist**
- Information Technology – Network Systems Engineer**
- Information Technology – PC Support Technician**
- Pharmacy Technician** *(Seniors only) *Must complete additional application materials*
- Pre-Engineering Technology – STEM Academy** **Must complete additional application materials; (only 9th and 10th graders can apply)*
- Underground Utility Locator Technician** *(Seniors and Adults Only)*
- Welding Technology**

Meridian Technology Center does not condone nor will it tolerate any form of discrimination based on of race, color, sex, pregnancy, gender, gender expression or identity, national origin, religion, disability, veteran status, sexual orientation, age, or genetic information in its programs, services, activities and employment.