Federation for Advanced Manufacturing Education (FAME)

Advanced Manufacturing Technician Program (AMT) 2020-2021 Application

*Please be sure to attach any <u>test scores</u>, <u>high school transcript (or GED)</u>, <u>vocational school</u>, <u>college or university transcript</u>, and a 250-word <u>typed</u> essay explaining your interest in the FAME Program. Please include the names and phone numbers of two personal and/or professional references that are <u>not</u> family members or friends.

		Applicant			ation			
Full Name:						D	ate:	
Address:	Last First				М.І.			
1001655.	Street Address						Apartment/Unit #	
	City				State		ZIP Code	
hone:		E	Email_					
lave you su	bmitted your UAM admission form?		_					
re you currently 18 yrs old or older?			_	NO □	If not, when will you turn 18 yrs old?			
Are you lega	Ily eligible to work in the United States?		_	NO □				
		Work Exp	erier	nce				
	de any work experience that you may ha						resume if you have one.	
Company/Bus	siness:	Phone#:			Job Title:			
Company/Bus		Phone#:			Job Title:			
Company/Bus From:	siness:	Phone#: Job Duties: _			Job Title:			
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Company/Bus From: Company/Bus From: From: High School: _ From: Name of HS C	siness: To: siness: To: must be attached for high school (or GE	Phone#: Job Duties: _ Phone#: Job Duties: _ Educat ED) and any vocation Addre	tion nal sch ess: uate? ((nool, Circle	Job Title: Job Title: college, and/or univ	ersity atte	ended.)	
Company/Bus From: Company/Bus From: From: High School: _ From: Name of HS C	siness: To: siness: To: must be attached for high school (or GE To: Guidance Counselor:	Phone#: Job Duties: _ Phone#: Job Duties: _ Educat ED) and any vocation Addre	tion nal sch ess: uate? (ess:	nool, Circle	Job Title: Job Title: , college, and/or univ e) Yes No D le) Yes No D	ersity atte	ended.)	

List awards and honors received:

Advanced Classes and Assessments

Did you participate in any of the following? (Circle or highlight yes or no)
Project Lead the Way? Yes No
Skills USA? Yes No
Mechatronics or First Robotics? Yes No
STEM Classes? Yes No
Have you taken any of the following assessments? (Circle or highlight yes or no) Assessment scores can't be more than 5 years old.)
ACT? Yes No
SAT? Yes No
ACCUPLACER or ACCUPLACER-NEXTGEN? Yes No
have not taken any of the assessments listed above but have taken the following assessment(s):
Military Experience
Branch: To:
Rank at Discharge: Type of Discharge:
f other than honorable discharge please explain:
References
References:
Name: Relationship:
Name: Phone #: Relationship:
Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to enrollment in the FAME Program, I understand that false or misleading information in my application or interview may result in my release from the program.

I understand that by submitting this application and supporting items, I am waiving my rights of nondisclosure of these records under federal law to FAME, the College Partner, and collaborating organizations. This release does not permit the disclosure of these records to any other person or entities without your written consent.

Applications without all required documents will not be considered.

Signature:

Date:

Please send your FAME Application and all pertinent documentation to the following address, and thank you for your interest in the FAME program.

UAM College of Technology-Crossett Attn: Keith Long 1326 Hwy 52 W Crossett, AR 71635 Office Phone: 870-460-2027 Email: LongGK@uamont.edu