

# 2025-26 FCTC Secondary Program High School Admission Application

Please print clearly and return to:  
High School Counselor

**Fall Term Starting August 2025 - Deadline February 14, 2025**

**Spring Term Starting January 2026 - Deadline October 15, 2025**

Please inform staff of any special services or assistance you may need.  
Acceptance into the program will be communicated by your home school counselor.  
Incomplete applications will be returned to the student's high school counselor.

FL Student ID # \_\_\_\_\_ Student Name \_\_\_\_\_  
Last First Mi Nickname

Primary Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
 (if different from Primary Address)

County of Residence \_\_\_\_\_ Student Personal Email (required) \_\_\_\_\_

Current High School \_\_\_\_\_ Highest Grade Completed \_\_\_\_\_

Home School Student? Y / N      Are you a PEP (Personalized Education Program) Home School Student? Y / N

Date of Birth \_\_\_\_\_ Birth City \_\_\_\_\_ Birth State \_\_\_\_\_

Student Phone # \_\_\_\_\_  Female  Male      Primary Language \_\_\_\_\_

Ethnicity: ( ) Hispanic/Latino ( ) Non-Hispanic/Latino Please also complete "Race" selection below. **CHECK ALL THAT APPLY.**

Race:  White  Black/African American  Asian  American Indian/Alaska Native  Native Hawaiian or Other Pacific Islander

Is English the student's second language?  Yes  No If Yes, what is first language? \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Parent/Guardian Email \_\_\_\_\_  
Last First

Parent/Guardian Contact #s (CELL) \_\_\_\_\_ (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

**Information below is to be completed by High School Counselor**

**If credits have been previously awarded for the same program of choice, PLEASE INCLUDE / ATTACH academic transcripts of program ONLY**

***Horticulture Science, Landscape Operations, Culinary Arts, Cosmetology, Early Childhood Education***

Grade Level: \_\_\_\_\_ IEP / 504 on file: Y / N (If yes, attach copy)      Periods at FCTC: 0 1 2 3 4 5 6

Semester/Term applying for:       Fall/Spring       Spring Only

1<sup>st</sup> Program Choice: \_\_\_\_\_ 2<sup>nd</sup> Program Choice: \_\_\_\_\_

School of Enrollment Code: \_\_\_\_\_ District of Enrollment Code: \_\_\_\_\_

**When requested program has insufficient enrollment, FCTC reserves the right to cancel class.**

School Counselor / Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_

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

IF THE STUDENT IS YOUNGER THAN 18 YEARS, THE PARENT OR GUARDIAN MUST COMPLETE THE AFFIDAVIT. I hereby certify that the information on this application is accurate to the best of my knowledge. By signing, I am giving my permission for the use of this data included herein in managing the program for which I am registered.

PARENT OR GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



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### FCTC Secondary Programs and Periods - Wednesday is early release for St. Johns County students

Periods	Period 00	Period 01	Period 02	Period 03	Lunch	Period 04	Period 05	Period 06
M, T, TH, F	8:00 am- 9:20 am	9:20 am- 10:10 am	10:15 am- 11:00 am	11:05 am- 11:50 am	11:50am- 12:20pm	12:25 pm- 1:25 pm	1:30 pm- 2:15 pm	2:20 pm- 3:00 pm
Wed- early release	8:00 am- 9:20 am	9:20 am- 9:55 am	10:00 am- 10:35 am	10:40 am- 11:15 am	11:15 am- 11:45 am	11:50 am- 12:50pm	12:55 pm- 1:30 pm	1:35 pm- 2:10 pm

**Uniforms/safety equipment are required for all FCTC programs.** Students must arrive in uniform. **Your FCTC Student ID Badge must remain visible while on FCTC campus.** Failure to comply could result in disciplinary action, suspension, and possible withdrawal from the secondary program. Be sure to review your program’s student contract.

**Periods/Credits:** Seniors seeking science and/or practical arts credit(s) may enroll in Horticulture or Landscape Operations for a minimum of one period.

**Attendance:** Please visit <http://fctc.edu/students/handbook/> to review the student attendance policy.

**\*\*\*Parking passes** are only available to students who are in a home education/private school, have documented mobility exceptions, attend an evening program, or whose home high school is NOT within walking distance.

**If the requested program has insufficient enrollment, FCTC reserves the right to cancel class.**

**Student must have at least 2 consecutive periods available in schedule. White space represents class times available.**

Program	Period 00 8:00 -9:20am	Period 01 9:20 -10:10 am	Period 02 10:15-11:00 am	Period 03 11:05-11:50 am	Period 04 12:25 – 1:25 pm	Period 05 1:30 -2:15 pm	Period 06 2:20 -3:00 pm
Cosmetology New or first year students							
Cosmetology Returning Students							
Culinary Arts							
Early Childhood Education							
Horticulture Sciences							
Landscape Operations							

### FOR FCTC STAFF

CourseNumber: _____	Entry Date: _____	Periods:	0	1	2	3	4	5	6
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