

ALLEGHENY INTERMEDIATE UNIT CAREER CONNECTIONS

APPLICATION SIGNATURE PAGE

Student Name:	
Career Connections Program – First Choice:	
Career Connections Program – Second Choice:	

- A \$75.00 check made payable to the Allegheny Intermediate Unit must be included.
- One recommendation is needed from your school and must be submitted to CareerConnections@aiu3.net
- Once you are accepted to a program, the registration fee is non-refundable.
- Acceptance letters will be emailed in July. Students not accepted will receive a refund of their application fee.
- This signature page and waiver form should be submitted before the deadline to:

AIU Career Connections Allegheny Intermediate Unit 475 East Waterfront Drive Homestead, PA 15120

PARENT'S SIGNATURE

Signature:	Date:
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Parent signature is required in order to process the application.

Transportation to the apprenticeship site is the responsibility of the student.

Once accepted to a program, the registration fee is non-refundable.

Contact Information

AIU Career Connections 412.394.4193 CareerConnections@aiu3.net

CAREER CONNECTIONS WAIVER AND PHOTO RELEASE

<u>Waiver</u>

The undersigned, while participating in the Allegheny Intermediate Unit Career Connections Program, agrees to abide by all rules and safety requirements for the site to be visited, and assumes all risks arising from or related to his or her participating in the program. The undersigned, and any parent or guardian, if a minor, hereby waives and releases the Allegheny Intermediate Unit from any and all claims and causes of action against the aforementioned for any damage or injury to the person or property of the undersigned, or parent or guardian, alleged to have been caused by any act.

	aiver shall apply at all times that the undersigned is away from his or her residence for cicipating in the Allegheny Intermediate Unit Career Connections Program.	
Date:	Signed by:	
If a minor, also signed by:(Parent or Guardian)		
Photograph Release		
and/or in other dis	rmediate Unit is permitted to display and/or share electronically via the Internet plays and/or in the news media photographs of me taken in conjunction with my AIU Career Connections program.	
Allegheny Intermed Unit's display of ph	ase, I understand and consent that photographs of me may be displayed by the diate Unit or by the news media. I also understand that the Allegheny Intermediate otographs of me on the Internet and/or in other displays and/or in the news media ographs to be viewed by the general public.	
Date:	Signed by:	
If a minor, also sign	ned by:	
	(Parent or Guardian)	
	EMERGENCY INFORMATION	
Name		
Emergency Contact	: & Phone Number	

PLEASE LIST ANY SPECIAL NEEDS RELATIVE TO PHYSICAL CAPABILITIES, DIETARY RESTRICTIONS OR TAKING MEDICATIONS THAT YOU MAY HAVE: