

SKYLINE COLLEGE

DAYTIME AUTOMOTIVE TECHNOLOGY PROGRAM

STUDENT APPLICATION AND SELECTION PROCEDURES

*NOTE: This application is **NOT** necessary for students wishing to register in AUTO 708, AUTO 710, or Saturday or Evening Automotive Classes. Students wishing to take the classes mentioned above need only use the Skyline College Application for Admission available in the back of the Schedule of Classes or online at www.skylinecollege.edu.*

The high student demand for occupational/technical training in the automotive trade necessitates that Skyline College develop a selection procedure that will allow fair and equitable opportunity for all students seeking admission to this program. Preference will be given to students who are residents of the San Mateo County Community College District. Students applying from outside the District will only be accepted on a space-available basis. Applicants will be informed of the status of their applications within six weeks of the application deadline.

The following selection procedure has been adopted for the fall and spring semesters. This application must be received by April 15 for the fall semester and by November 15 for the spring semester. **All documents must be sent to the Office of Admissions and Records.** Applications received after the deadline will be assigned the next available number on a waiting list according to the date received. You are responsible for all of the following:

Requirements for Admission

1. Completion of the Daytime Automotive Technology Program Application (attached).
2. Completion of the Skyline College Application (attached).
3. Documented proof of prior experience. **All statements MUST be substantiated by attached documents of verification (a transcript or letter from employer).** Such documentation may come from one or more of the following:
 - A. One semester of AUTO 710 at Skyline College (or equivalent from another community college) with a grade of "B" or higher (**Submit a copy of your final grade report with your application or a letter from your instructor.**)

OR
 - B. One year of high school automotive training with grades of "B" or higher (**verified by official transcript**). Also, a letter of recommendation from an automotive instructor would be beneficial or a copy of a Tech Prep Certificate of credit.

OR
 - C. One year of R.O.P. Automotive training with a grade of "B" or higher or equivalent training. (**A copy of your R.O.P. Certificate must be submitted with your application.**)

OR
 - D. One year of full-time related work experience. This will be documented by submitting a letter with this application from your employer specifying employment dates and duties.
4. All students must meet the math proficiency requirement in one of the following ways:
 - A. Eligibility for MATH 110, 111 or higher on the Skyline College Math Placement Test. (**Submit a copy of Math Placement Test results with your application.**) **Test scores are good for 2 years from date of test.**

OR
 - B. **Submitting a college transcript** showing completion of MATH 811 or its equivalent with a grade of "C" or higher.

5. All students must meet the English proficiency requirement by:
- A. Eligibility for ESOL 400 or ENGL 836, 105, or 100 and READ 836 or 420 on the Skyline College English Placement Test or qualifying course work (**Submit a copy of your English Placement Test results or your final grade report from your qualifying course work with your application.**) Test scores are good for 2 years from date of test.
- OR
- B. Satisfactory completion of ENGL 826 with a grade of "C" or higher and READ 826 with a grade of "C" or higher. (**Submit a copy of your final grade report with your application.**)
6. Pre-enrollment interview with Skyline College Automotive counselor.
(Please call counseling at (650) 738-4317 and ask for an appointment with the Automotive counselor.)

NOTE: Minimum requirements may be lowered at the discretion of the selection committee, depending on the number of available seats and the number of applicants.

COMPLETED APPLICATION AND DOCUMENTATION AS REQUIRED SHOULD BE SUBMITTED TO

OFFICE OF ADMISSIONS AND RECORDS
SKYLINE COLLEGE
3300 COLLEGE DRIVE
SAN BRUNO, CA 94066

NO LATER THAN **APRIL 15 FOR THE FALL SEMESTER** AND NO LATER THAN **NOVEMBER 15 FOR THE SPRING SEMESTER**. (Grades for course work in progress should be submitted at completion of course.)

PLACEMENT TEST DATES

For testing dates and times please contact the Testing Office at (650) 738-4150.

FEE SCHEDULE (current as of Fall 2008)

FEE TYPE	AMOUNT
Enrollment	\$20 per unit
Health Services	\$16
Student Representation	\$ 1
Student Body	\$ 8
Student Union	\$ 5 max per semester
Parking	\$40

To verify current fees check www.skylinecollege.edu.

For information regarding fee waivers and refund policies, consult the current college catalog or class schedule.

The current cost of tools purchased in connection with this program is approximately \$ 1,300 for the first semester with an additional \$900 over the remaining four semesters. Information regarding possible financial assistance to defray program costs is available from the Office of Financial Aid, Building 2, Student Services Center, (650) 738-4236 and E.O.P.S., Building 2, Student Services Center, (650) 738-4139.

For further information contact the Automotive Department at (650) 738-4438
or the Office of Admission and Records at (650) 738-4251
Web site: www.skylinecollege.edu/automotive

**SKYLINE COLLEGE
OFFICE OF ADMISSIONS AND RECORDS**

MAILING ADDRESS
(Please print plainly)

NAME _____ S/S# _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

FOLD LINE

Dear Automotive Technology Applicant:

The Skyline College Office of Admissions and Records hereby acknowledges that your application for the Automotive Technology Program has been received and is:

Complete and will be forwarded to the selection committee for review. They will advise you further of their actions.

Incomplete and will not be considered until you supply the following:

PLACEMENT TEST SCORES

HIGH SCHOOL TRANSCRIPT (**REQUIRED** to verify High School Automotive Training.)

DOCUMENTATION OF PRIOR AUTOMOTIVE EXPERIENCE

Your application will not receive further consideration unless the documents noted above are submitted by: _____

Being returned to you. It was received beyond the deadline and will not be reviewed by the Selection Committee.

Signature: _____

FOR OFFICE USE ONLY

APPLICATION RECEIVED ON: _____ BY: _____
(Date) (Name)

SOURCE: Mail In Person

APPLICANT NOTIFIED ON: _____ BY: _____
(Date) (Name)

SOURCE: Mail In Person

COMMENTS:

SKYLINE COLLEGE AUTOMOTIVE TECHNOLOGY PROGRAM APPLICATION FORM

For the Morning and Afternoon Automotive Programs Only

Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Social Security Number: _____ Telephone Number: (____) _____

Are you a High School Graduate? Yes No If no, what is the highest grade you completed: ____ I have a G.E.D.

Name of High School last attended: _____ Last year you attended: _____

1. AUTOMOTIVE EXPERIENCE:

Please indicate the automotive experience(s) you are using to meet the program entrance requirement:

- High School Automotive One year with grades of "B" or higher. (Please attach your High School Transcript)
- R.O.P Automotive One year with grades of "B" or higher. (Please attach a copy of your R.O.P. certificate.)
- AUTO 710 at Skyline College with a grade of "B" or higher. (Please attach a copy of your final grade report for AUTO 710)
- Currently registered in AUTO 710 at Skyline College—Please indicate the semester you are taking AUTO 710
- Automotive Work Experience (one year full-time) Please include a letter from your employer on his/her business stationery.
- Other (please explain and attach verifying information) _____

● Be sure to attach copies of documentation that will verify your Automotive experience(s). Failure to attach documentation will delay the screening of your application.

2. SKYLINE COLLEGE MATH AND ENGLISH PLACEMENT TEST RESULTS:

- Attached is a copy of the results of my Skyline College Math and English Placement test (or a transcript showing the College level Math and English classes I have taken).
- I am planning to take the Placement test on _____ and will send/deliver the results.
- Neither of the above. (Please explain) _____

3. LIST CERTIFICATES, LICENSES, OR CREDENTIALS HELD AND ATTACH COPIES (if applicable).

4. PLEASE MARK YOUR PROGRAM PREFERENCE:

- Morning Program (All manufacturers--generic)
- Afternoon Program (Japanese manufacturers)
- I have no preference. Either program is fine.

Applicant's Signature: _____ Date: _____

		NEEDS:	ACTION TAKEN:
VERIFICATION OF TRAINING: _____	<input type="checkbox"/>	_____	() ADMIT
ENGLISH PLACEMENT: _____	<input type="checkbox"/>	_____	Initials: _____ Date: _____
READING PLACEMENT: _____	<input type="checkbox"/>	_____	() WAITING LIST
MATH PLACEMENT: _____	<input type="checkbox"/>	_____	Initials: _____ Date: _____
RESIDENCY STATUS: _____	<input type="checkbox"/>	OUT OF COUNTY: <input type="checkbox"/>	Initials: _____ Date: _____
			() NOT ELIGIBLE
			Initials: _____ Date: _____
			Initials: _____ Date: _____

