

**MILWAUKEE SCHOOL OF ENGINEERING
YOUTH OPTIONS PROGRAM (YOP) APPLICATION**

(PLEASE PRINT)

Name _____
Address _____

Phone _____
Birth Date _____ Male _____ Female _____
E-mail Address _____

Parent's or Guardian's Name _____
Address (if different) _____

Phone (if different) _____

Term Desired Fall 20 _____ Winter 20 _____ Spring 20 _____

Course Name _____ Course Number _____
Preferred Course Time _____

I give permission for my high school to release my transcripts to MSOE for the purpose of verifying prerequisites for YOP courses. I also understand that my MSOE transcript will be sent to my high school.

Student Signature _____ Date _____
Parent or Guardian Signature _____ Date _____

Guidance Counselor: Please enclose this student's transcripts reflecting the proper prerequisites as required for the specific class. If there are any questions regarding prerequisites, please call Brian Burke in the MSOE Learning Resource Center at the number below.

Guidance Counselor Signature _____ Date _____
Print Name _____ Phone _____
High School Name _____

THIS IS NOT AN APPLICATION FOR REGULAR ADMISSION TO MSOE.

This application only allows this student to enroll in the specified YOP class(es) for college credit at Milwaukee School of Engineering while still enrolled in high school. It does NOT act as an application to be admitted to the college. Please call the MSOE Learning Resource Center if there is any question about the appropriate form to be used. **Please mail this application, your high school transcript and your DPI approval form to:**

Brian Burke
MSOE Learning Resource Center
1025 North Broadway
Milwaukee, WI 53202-3019
(414) 277-7266
burke@msoe.edu