

STUDENT APPLICATION PACKET







































About NEXTUniversity

NEXTUniversity is a career development program that empowers you to successfully transition into a career in the local workforce. NEXTUniversity works with high school students, high school equivalency (GED) graduates, and post-secondary students through post-secondary graduation, providing them with tools such as mentorships, scholarship opportunities, internships, and community connections. Students will have an AISD-designated Career Coach who will connect them to all these tools through a personal career development plan.

Our AISD Career Coach will support students as they transition into technical training programs that support the Development Corporation of Abilene's target industries, aiming to fill in-demand jobs for Abilene's advanced manufacturing industries. The long-term goal of *NEXT*University is to build a deep and highly skilled talent base of local talent, capable of positioning graduates for success, but the benefits don't stop there. Local businesses that hire *NEXT*University scholars and graduates will resolve a growth barrier by facilitating their ability to expand their local business operations.

NEXTUniversity Student Eligibility Requirements:

- Must be a current high school student, high school graduate, or have completed their High School Equivalency (GED)
- Must be 22 years of age or younger upon acceptance into NEXTUniversity
- Complete application packet guardian signatures required for all participants under the age of 18

For more information please contact: Elisha Seca, AISD Career Coach, NEXTUniversity (325) 677-1444 x1587 or angel.seca@abileneisd.org

NEXTUniversity Student Application Checklist

STEP 1: Student Application Form
Dual credit and post-secondary students should complete the student information, education information, parent/legal guardian information,
and select a career pathway.
STEP 2: Consent for Release and Use of Information
Dual credit and post-secondary students should complete the consent to release form which allows NEXTUniversity to work with students and
provide services on an as-needed basis.
STEP 3: College Tour/Travel Agreements
Dual credit students and parents should complete the college tour/travel agreements.
STEP 4: Scholarship Acceptance Form
Dual credit and post-secondary students should complete the scholarship acceptance form, be prepared to provide proof of enrollment, and
keep contact information current.
STEP 5: Letter of Recommendation
Dual credit students should provide one letter of recommendation from a CTE instructor who can assess the applicant's academic ability, specia
calents, and character. Post-secondary students should acquire a letter of recommendation from a non-family member (e.g., employer, teacher
volunteer leader, etc.).
STEP 6: Career Goal Statement
Dual credit students and post-secondary students should write a paragraph that explains their career goal(s) and how the NextUniversity career
development program will help them meet those goals.
STEP 7: Read "Required Information for FAFSA Assistance"







Student Application Form

Please complete the following application to the best of your ability. If you have questions, contact Elisha Seca by phone at (325) 677-1444 ext. 1587 or by email at angel.seca@abileneisd.org.

Student Information					
First Name		Last Name			
Mailing Address					
City		State		Zip	
Phone	()	This is a	mobile numb	per	
Email Address					
Date of Birth		Age at Appl	ication		
Education Information					
High School/Grade			Student ID		
Status (Check one)	Currently enrolled Graduated				
College			Student ID		
Status (Check one)	Currently enrolled Graduated				
NEXTUniversity Career	Pathways				
I'm interested in the following areas of study (check all that apply):					
☐ Welding ☐ Aircraft Technology ☐ Industrial Systems ☐ Engineering ☐ Healthcare (LVN)					
☐ Electrical ☐ IT/Support Services ☐ Programming/Software ☐ Agricultural Engineering				Engineering	
For applicants under the age of 18, please complete the following:					
Parent or Legal Guardi	an	T		1	
First Name		Last Name			
Mailing Address					
City		State		Zip	
Phone	()	This is a	mobile numb	oer	
Email Address					







Consent for Release and Use of Information

The program is voluntary and *NEXT*University students must give permission for AISD and the DCOA to remain in contact with them once they have graduated from high school. As a willing Participant of *NEXT*University, I consent to the following: All services are provided on an as-needed basis.

- 1. Iwillingly agree to participate in NEXTUniversity services which include but are not limited to supportive guidance, college/career counseling/support, educational support, financial aid support, referrals to local college resources, invitations to alumni summer get-togethers, mentoring and speaking engagements.
- 2. I acknowledge that the release of records under this consent is subject to any limitations placed by federal and state law.
- 3. I understand that the data and information collected about me is maintained. This information is used by NEXTUniversity to document services provided to me for tracking and reporting purposes. I also understand that NEXTUniversity may use the information to update service information, provide closure and follow-up information, and evaluate and determine the effectiveness of the program. I authorize NEXTUniversity to maintain the information provided for the purposes noted above.
- 4. I acknowledge that this consent allows release of 3 years of data. I further acknowledge that if I am away at college and do not have the ability to sign a new consent/release of information, that I can give verbal consent over the phone and/or send an email updating my consent.
- 5. I acknowledge that the records released may contain references to other persons such as members of my family.
- 6. I acknowledge that I allow *NEXT*University to use my information to check in the National Student Clearinghouse for verifying college enrollment for a period not to exceed 7 years after the date consent is signed.
- 7. I understand that confidentiality is a part of non-disclosure/privacy concerning all issues discussed while participating in *NEXT*University and that for the Coordinator to be allowed to talk with my parents or college I must give consent. The law includes the following exceptions to confidentiality: written or verbal threat of suicide or homicide, and suspicion of life-threatening abuse.
- 8. I willingly agree to receive support via Remind, text, email, phone, online social media, and face-to-face interactions.

9.	AISD/NEXTUniversity may use photographs, written stories, or videos of me/my child in its publications, including its website for program purposes.
	Yes
	□ No

SIGNATURES REQUIR	ED		
Student Name		Date	
Student Signature			
Guardian Name		Date	
Guardian Signature			







College Tour/Travel Agreement: Student/Participant

PLEASE READ CAREFULLY!

STUDENT VIOLATION OF THE FOLLOWING RULES DURING A COLLEGE TOUR WILL LEAD TO DISCIPLINARY ACTION.

- 1. In order to participate in a *NEXT*University college tour you must be in academically good standing (passed the previous six weeks & currently passing all classes), meet the college admissions standards, and possess a clean disciplinary record.
- 2. The number of tours you are allowed to participate in is set by your campus. If you signed up for a tour but are unable to attend due to an unforeseen conflict you must let the AISD Career Coach know ahead of time.
- 3. Your parent/legal guardian must sign a travel consent/medical release form prior to leaving for a tour. If we do not have one on file, you will not be allowed to join us. NO EXCEPTIONS.
- 4. All the costs for your meals, transportation and lodging for college tours will be provided for by the *NEXT*University program. Refreshments you wish to purchase at the convenience or bookstores must be at your own expense.
- 5. All tours scheduled through the NEXTUniversity Program and on the campus-calendar will not count against you as an absence. An excused list will be provided to the attendance office one week prior to the scheduled tour. The morning of departure if you have not shown up for the tour you will not be excused from school and will be expected in class. If you participate in extra-curricular activities, it is YOUR RESPONSIBILTY to obtain permission from your coach or sponsor.
- 6. During transportation, you may listen to and bring your cell phone. However, all AISD bus and transportation rules must be obeyed at all times. No sunflower seeds or drinks without a screw top are permitted. Trash bags will be provided.
- 7. An itinerary will be provided to you prior to departure. You are expected to have transportation to and from your high school campus regardless of the departure or arrival time for the tour.
- 8. You agree to conduct yourself respectfully while on a campus tour. Disruptive behavior is not permitted. All sponsors and tour guides reserve the right to terminate the campus visit should disruptive behavior occur during the tour, admission presentation or during transport to and from a campus visit. Examples of disruptive behavior include talking to friends during a tour or asking inappropriate questions to a tour guide.
- 9. You may not use any electronic devices during the college tour or admission presentation (i.e., cell phones, airpods).
- 10. For your comfort, please dress for the weather and wear comfortable walking shoes for tours. Please remember AISD dress code will be observed.
- 11. If we dine in the campus facilities, all food must be consumed on the premises and may not leave the facilities.
- 12. Sponsors retain the right to add rules while on a campus tour. Overnight tours will have additional tour requirements and will be announced prior to departure, including a strict curfew time. All bags will be inspected during overnight visits.

SIGNATURES REQUIRE	D				
Student Name				Date	
Student Signature					
Current Grade	10 th	11 th	12 th		







College Tour/Travel Consent Parent/Legal Guardian

Please complete all sections of this form. If a section is not applicable, please write N/A.

riease complete all sections of	tilis lottii. It a section is	not applicable,	piease write in	/A.	
Student Name		D	ate		
Student Cell	()	G	uardian Cell	()
Guardian		A	ddress		
Family Physician		D	r. Phone	()
Insurance Co		Po	olicy #		
Special Instructions				1	
Daily Medications					
List Allergies					
I give permission for my child _ Education Foundation (AEF)/Notice from any expectation of confide further give my consent for any such as weapons, alcohol, or districted that child's possession or room his/her room without the conserved from his current location and the conserved from his current location and the conserved from his current location and the case of an emergency, we will cannot be reached, we need to "In the event my child, be reached by telephone, I here sponsors of Abilene Education for the emergency treatment of whatever is deemed necessary incurred as a result of any accided and the conserved for the misfortune which might occur in the misfortune which might occur in the conserved for the misfortune which might occur in the conserved for the conserved for the emergency treatment of the conserved for	entiality and attest that I a y sponsor to search my chirugs (including prescription). I understand if prohibite ent of a sponsor, I will be che school's police officer when the carefully! It make every effort to conhave your permission to one by authorize Elisha Seca, Foundation or Abilene IS of my child. I understand the by the attending physician dent or illness my child make presentatives of Abilene	the 2021-2022 some the parent or ild's luggage or report of the parent of the parents of the par	school year. I re legal guardian oom if it is susp escribed by a do d, or if my child c up my child im fof the student. treatment for y n of an accident w, Tamika Bray e trip, to take w nay include eme and that I am re this trip. I do no	lease AISD of the chil ected that ector to my breaks cumediately of the siturour child. or sudder e, LaQuier whatever mergency suesponsible ot hold Ab	o/NEXTUniversity d listed above. I t any prohibited items y child) might be in urfew and leaves y, at my own expense, ation is critical and you n illness and I cannot ra Gantt, or any neasures are necessary rgery, medication, or for any expenses ilene ISD or Abilene
SIGNATURE REQUIRED					
Guardian Name					
Guardian Signature				Date	







Scholarship Acceptance Form

By returning this acceptance form, I am accepting the *NEXT*University scholarship, agree to provide proof of enrollment and keep my contact information current. I understand my scholarship eligibility could be jeopardized if I do not comply with these requests.

Name		Phone	()			
College	Cisco TSTC	Cisco TSTC				
Program		/elding				
Students please init	cial below confirming statements:					
Once I have registered for my classes, I will furnish NEXTUniversity with a copy of my class registration. I understand that no funding can be released without this information. If I should change my any information from the above-named program/school, I will notify NEXTUniversity and provide a new student ID# and a copy of my new class registration. I understand that if I fail a course or do not complete a course, I am responsible for the cost						
of tuition and any other related costs for the failed or incomplete course. SIGNATURES REQUIRED						
	Required for participants under 18 years of	age				
Student Name			Date			
Student Signature						
Guardian Name			Date			
Guardian Signature						
School District Signa	ture					
NEXTUniversity Sign	ature					







Letter of Recommendation

(The reference has the option to use this form or submit a separate document).	
Reference's Name (Print):	
Relationship to Student:	
Student Name (Print):	
Reference's Signature:	







Career Goal Statement

In the space provided below, please write a paragraph that explains your career goal(s) and how the NEXTUniversity career development program will help you meet those goals.







Required Information for FAFSA Assistance

The Career Coach is available to assist you with completing the FAFSA (Free Application for Federal Student Aid – more information on FAFSA.gov). If you would like assistance completing the FAFSA, here are the required forms/information:

- A note from your parent/guardian giving the Career Coach permission to help you complete the FAFSA
- Your Social Security number
- Your parents' Social Security numbers if you are a dependent student
- Your driver's license number if you have one
- Your Alien Registration number if you are not a U.S. citizen
- Federal tax information, tax documents, or tax returns including IRS W-2 information, for you (and your spouse, if you are married), and for your parents if you are a dependent student:
 - o IRS 1040
 - Foreign tax return or IRS 1040NR
 - Tax return for Puerto Rico, Guam, American Samoa, the U.S. Virgin Islands, the Marshall Islands, the Federated States of Micronesia, or Palau
- Records of your untaxed income, such as child support received, interest income, and veterans noneducation benefits, for you, and for your parents if you are a dependent student
- Information on cash; savings and checking account balances; investments, including stocks and bonds and real estate (but not including the home in which you live); and business and farm assets for you, and for your parents if you are a dependent student