

Application for Enrollment

Name:		Phone:
Address:		
State: Zip:		E-Mail:
High School or GED:		HS Graduation Year:
Number Years Attended	University/College:	-
Name of University/Coll	.ege:	
Degree, Major, &	Year:	
Other Colleges, Technica	al / Trade Schools:	
Majors / Crafts /	Trades studied:	
Describe why you wish	to enroll in CWA; include	background, skills, work experience or other
relevant information: _		
List medical conditions	that may impact your abi	lity to attend classes or that CWA should be
aware of:		
Recommendations. Prov	ride two professional or a	cademic contacts that can testify to your
suitability for CWA		
1. Name:	Position:	Phone:
Address:		
2. Name:	Position:	Phone:
Address		

All Students will be required to show proof of high school graduation or equivalency diploma and to be at least 18 years of age.

Mail application to: Chattanooga Woodworking Academy; 1604 S. Market St; Chattanooga, TN 37408