Miami-Dade County Public School

SOUTH DADE TECHNICAL COLLEGE

Get A Career In 1 to 2 Years!

2026-2027 CAREER DUAL ENROLLMENT APPLICATION

APPLICATION DEADLINE: Friday May 29, 2026

As a potential Career Dual Enrolled High School Student, you must have a minimum of 2.0 UNWEIGHTED GPA and must demonstrate consistent good standing in attendance, conduct, and effort. Email your completed application to claudiamoran@dadeschools.net.

Name: _____ M-DCPS ID# _____
Last First MI

Home School Name: _____ Grade: _____ Unweighted GPA: _____

Home Address: _____
Street Address City, State Zip Code

Date of Birth: _____ Student Phone Number: _____ Student Email: _____

Name of Parent/Guardian: _____

Parent/Guardian Relationship: _____

Phone Number: _____

E-Mail: _____

My child will require M-DCPS transportation to attend *(not available for private, charter, or home school students).*
YES ☐ NO ☐

School Personnel (ONLY): All boxes must be checked prior to submission:

Counselor: ***I RECOMMEND*** YES ☐ NO ☐

PF1 Screen Attached ☐ PF7 Screen Attached ☐

PF3 Screen Attached ☐ Minimum 2.0 GPA ☐

DIRECTIONS: Listed below are programs of Career Pathways. *Please select a program of interest:*

- ☐ Hemodialysis Techician
- ☐ Pharmacy Technician
- ☐ Medical Assisting
- ☐ Early Childhood Education
- ☐ Master Automotive Service Technology
- ☐ Heating, Ventilation, Air-Conditioning/Refrigeration (HVAC/R)
- ☐ Patient Care Technician
- ☐ Electricity (ONLY for Homestead SHS)

Please see our website at www.southdadetech.edu for eligibility requirements under admissions.

☐ ***I have read and fully understand the conditions pertaining to this offer of acceptance and do hereby accept the invitation to attend South Dade Technical College for the complete school year.***

Please initial next to each statement acknowledging the following:

_____ I acknowledge that additional information may be required to fully process enrollment at South Dade Technical College, and that acceptable levels of academic performance, attendance, and conduct are required for continued enrollment.

_____ I further acknowledge that knowingly providing false information on this and/or any application/admission document may revoke the offer of acceptance and subsequent enrollment at any time.

_____ _____
Student Signature & Date Parent/Guardian Signature & Date