SOUTHEAST COMMUNITY COLLEGE-MILFORD CAMPUS
MOPAR CAREER AUTOMOTIVE PROGRAM (MCAP)
DEALER APPROVAL FORM

APPLICANT NAME:
I am applying for admission to the MOPAR CAREER AUTOMOTIVE (MCAP) partnership program at Southeast Community College. I understand I must successfully complete coursework through Southeast Community College in order to maintain my eligibility for the co-operative requirements at my partnering dealership. I also understand the College must communicate relevant information about my academic progress with my dealership to insure I remain eligible to complete this partnership program.
I hereby grant permission to Southeast Community College to share copies of any transcripts, pre-admissions test results, interview data, college grades, attendance information, academic progress reports and student account statements with my sponsoring dealership and their related corporations or companies.
*Applicant: Please submit this form to the college after the interview.

Student Signature __________________________________________ Date ___________________
DEALER INTERVIEW: Discuss the following subjects with the applicant. Satisfy yourself that the applicant meets your standards.

1. EDUCATION & EXPERIENCE: Every applicant will have a unique background. Prior training or experience is not essential for success in MOPAR-CAP but may be valuable in certain instances.
2. SCHOLASTIC APTITUDE: Review the applicant’s potential to complete the academic work required for graduation. This can be determined by interview, testing and consultation with the college or high school.
3. COMMITMENT: MOPAR-CAP is approximately two years in length. The MOPAR-CAP student must make an honest commitment to complete all required courses.
4. EMPLOYABILITY: The applicant should be viewed as seeking permanent employment. MOPAR-CAP will help train your future technician. Is this person someone you could employ full-time once the required skills are learned?
5. CAREER INTEREST. The applicant should express a strong desire to be a professional automotive technician. Are his/her goals consistent with the dealership's needs for the next few years?

DEALER APPROVAL: I recommend this applicant for the MOPAR Career Automotive Program and agree to provide sponsorship.

Dealer/Authorized Representative __________________________ Title __________________________
Dealership __________________________ Telephone __________________________
Dealership Address __________________________

City/State __________________________ Zip __________________________ Date __________________________

APPLICANT NOT RECOMMENDED FOR SPONSORSHIP

Dealer/Authorized Representative __________________________ Title __________________________
Dealership __________________________ Date __________________________

Send to:
ADMISSIONS OFFICE
SOUTHEAST COMMUNITY COLLEGE
MILFORD CAMPUS
600 STATE STREET
MILFORD, NE 68405-8498

23
Dealer Approval Form (Cont’d.)

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______ Approved for entry into **MOPAR-CAP** at Southeast Community College-Milford Campus

______ Alternate (will be notified if space in class becomes available)

______ Not accepted __________________________________________________________

______ Applicant and sponsoring dealer have been notified of the applicant’s status.

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FOR COLLEGE USE ONLY

Student Notified  _____

MOPAR TC Notified _____

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