

Highland Canine Training, LLC  
School for Dog Trainers  
Main Campus  
145 Foxfield Drive  
Harmony, NC 28634



Highland Canine Training, LLC  
School for Dog Trainers  
Southeast Campus  
4339 County Rd 216  
Hanceville, AL 35077

## Student Application

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### Application for Enrollment

Your Legal Name \_\_\_\_\_  
First Middle Last

Preferred Name \_\_\_\_\_

Your Address \_\_\_\_\_

City \_\_\_\_\_

State or Province \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender: Male Female

Social Security Number \_\_\_\_\_

Your Telephone Number

Home \_\_\_\_\_

Cell \_\_\_\_\_

Best time to call: morning afternoon evening

Email \_\_\_\_\_

Preferred method of contact: PHONE EMAIL

Country of Citizenship \_\_\_\_\_

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### Academic Information

#### High school Information

High school name \_\_\_\_\_ City/State \_\_\_\_\_ Graduation Year \_\_\_\_\_

#### College/University information

Name \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_ State \_\_\_\_\_

Course You are Applying for: \_\_\_\_\_

Length of Course \_\_\_\_\_ weeks

Which course offering are you applying for:

*(select only one)*

JAN \_\_\_\_\_ APR \_\_\_\_\_ JUL \_\_\_\_\_ OCT \_\_\_\_\_  
*(year) (year) (year) (year)*

Will you require housing? Yes No Maybe

How do you plan to pay the tuition? Out of Pocket Financing GI Bill Other

If Other please specify: \_\_\_\_\_

If GI Bill, which chapter will you be using: \_\_\_\_\_

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### Consent for Criminal Background Check

Full Legal Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_

SSN \_\_\_\_\_

I certify that to the best of my knowledge and belief, the information provided in this document truly represents me. I understand that failure to give complete information, falsification or misrepresentation of information may prevent me from enrolling in Highland Canine Training, LLC. I authorized investigation of all statements made in this document and further authorize educational institutions, criminal justice agencies, and others to furnish whatever detail is available concerning my application.

My signature below further authorizes Highland Canine Training, LLC to obtain criminal background information. I understand that any information obtained by Highland Canine Training, LLC is confidential, will not be released to any person or outside agency without my written consent, and will be used for the sole purpose of assessing my qualifications.

I \_\_\_\_\_, give my permission to Highland Canine Training, LLC to initiate a Criminal background check on my personal and present activities.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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### Video and Photo Release

I, the undersigned, do hereby consent and agree that Highland Canine Training, LLC, its employees or agents have the right to take photograph, videotape, or digital recordings of me and to use it in all media, now or hereby known, and exclusively for the purpose of supporting and promoting the mission of Highland Canine Training, LLC

I further consent that my name and identity may be released therein or descriptive text or commentary. I do hereby release to Highland Canine Training, LLC its agents, and employees all right to exhibit this work in print and electronic form publicly or privately and to market my identity or likeness in whatever media used. I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I further agree that such photographs or video footage may be used for educational and marketing purposes in Highland Canine Training, LLC promotional video materials (Newsletters, Brochures, videos Etc.) and or third-party use by funder or perspective funder.

I also understand that Highland Canine Training, LLC its not responsible for any expense or liability incurred as a result of your participation in this recording, including medical expenses due to any sickness or injury incurred as result.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement. This consent shall remain valid until written notice is provided to the contrary.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



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### Physical Requirement Acknowledgement

I, \_\_\_\_\_, confirm that I meet the mandatory physical requirements for participation in Highland Canine Training, LLC School for Dog Trainers programs. I hereby affirm that I am in good physical condition and do not suffer from any known disability or condition which would prevent or limit my participation in this program.

I recognize that the program may involve strenuous physical activity as outlined below and within the program catalog:

- Attach and detach animal training collars and leashes.
- Grasp and hold a leash, controlling small, medium and large dogs.
- Be outdoors in various weather conditions.
- Lift up to 40lbs
- Carry up to 20lbs
- Physically restrain large dogs
- Hear normal conversation up to 100ft away and in close proximity to others.
- Running for extended periods of time while conducting activities such as trailing, police dog training, etc.

I fully understand that I may injure myself as a result of my enrollment and subsequent participation in this program and I hereby release Highland Canine Training, LLC and it's agents from any liability now or in the future for conditions that I may incur. These conditions may include, but are not limited to, heart attacks, muscle strains, muscle pulls, muscle tears, broken bones, shin splints, heat prostration, injuries to knees, injuries to back, injuries to foot, or any other illness or soreness that I may incur, including death.

I HEREBY AFFIRM THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



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### Student Interview

Tell me about yourself.

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How did you hear about our school?

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Why did you choose our school?

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Why did you choose this course of study?

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What do you think are the most important qualities someone should possess in your chosen field of study?

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What interested you most about Highland Canine Training, LLC School for Dog Trainers?

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Least? \_\_\_\_\_

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Have you taken any courses that would relate to this course of study? \_\_\_\_\_

Which did you enjoy the most? \_\_\_\_\_

The least? \_\_\_\_\_

Why? \_\_\_\_\_

What two or three things are most important to you concerning your education?

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What characteristics do you possess that will make you successful in your education choices?

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What is your primary motivation for attending school?

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Who, or what, influenced you most with regards to your education choices?

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What are your career objectives in regards to your course of study at Highland Canine Training, LLC School for Dog Trainers?

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Tell us why we should admit you to our program(s):

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Do you have any questions or concerns?

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