



Commercial HVACR Training Program

- ESCO Electrical Credential
- ESCO Gas Heat Credential
- ESCO Light Commercial Air Conditioning Credential
- ESCO System Diagnostics & Troubleshooting Credential
- OSHA 10 Certification
- EPA 608 Universal Certification
- Low GWP A2L Certification

Class schedule: Monday through
Thursday, 5:30 PM – 9:00 PM



Duration: 12-month program beginning
January 12, 2026

Location: Fort Hayes Career Center, 546 Jack Gibbs Blvd, Columbus 43215

Cost: \$7,200

Financial aid including grants is available for eligible students!

For the online program application and more details,
click *HVACR* on our webpage ccsoh.us/ACE
or contact Julie Kudika (380)997-7617
email: jkudika2700@columbus.k12.oh.us



Financial Aid Resources

Financial Aid Coordinator: Jennifer Wells

Call 380-997-7620 or email jwells@columbus.k12.oh.us

Federal Resources

FILING THE FAFSA

The FAFSA may be filed online at www.studentaid.gov

You will need the following:

- Your most recent completed Federal Income Tax Return
- Our school code: **015235**
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Steps to complete FAFSA:

- Establish a FSA ID on <https://studentaid.gov/fsa-id/create-account/launch>
- Complete & Submit your application at <https://studentaid.gov/h/apply-for-aid/fafsa>
- You will receive a Confirmation Page with SAI (Student Aid Index) which provides an estimate of what you can afford. Print this page for your records.
- You will receive an email that your FAFSA has been processed after the application deadline date. Give the Financial Aid office 3-5 business days to receive your application.

State Resources

Second Chance Grant- Have you stopped out of an Ohio public college or university within the last 5 years? You may qualify for up to \$3,000 to enroll and complete your Practical Nursing Certificate.

Contact Student Services for details.

Ohio Reach Grant- Network of resources designed to support former foster youth as they go through their higher education journey.

Other Resources

Columbus City School Scholarship – One full tuition scholarship is awarded to a graduating Columbus City Schools senior attending the HVACR Program. Contact Student Services for more information.

WIOA funding- Local counties MAY have funds available to cover part of your tuition costs. Participants who qualify for the WIOA program may receive an "Individual Training Account" to assist with tuition costs. Call Franklin County Ohio Means Jobs: 614-559-5052.

Check with your employer. Many employers offer tuition assistance.

Conduct an internet search. Many scholarships are available.

Consumer Information:

See the ACE website at <https://www.ccsch.us/Page/2207> for consumer information on financial aid.



Commercial HVACR

Application Checklist

Items due for application:

☐	Completed current program application
☐	High School Diploma, High School Equivalency Certificate, or Foreign Education Evaluation for foreign-earned high school diploma*
☐	Legal Photo I.D. or Driver's License
☐	Social Security Card
☐	Skills Readiness Assessment passing score - to be arranged through Student Services

***Foreign Education Evaluation:** If your high school diploma is from a foreign country, your foreign high school transcripts will need to be evaluated by a credential evaluation service and sent directly to:

Adult & Community Education - HVACR
2323 Lexington Avenue
Columbus, OH 43211

Please keep in mind that the process may take several weeks. **A general statement or summary is sufficient;** we do NOT need a course by course evaluation.

The following are some services offering education evaluation:

<https://validential.com/>

<https://usces.org/>

<https://www.ece.org/ECE>

Adult Workforce Education Program Application 2025-2026

Please review the application checklist to make sure you
have attached all required documentation prior to submitting your application.
Incomplete application packets will not be accepted.

Program:

☐ HVACR ☐ Other _____

Today's Date: _____ Program Start Date: _____

Name as it appears on ID:

Last Name: _____

First Name: _____ Middle Name: _____

Other Names (Maiden) _____

Social Security Number: _____ - _____ - _____

Birth Date: _____

E-Mail: _____

Street: _____ APT.# _____

City: _____, OH Zip: _____

Cell Phone: () _____ - _____

Have you previously attended college or a post-secondary school? Yes ____ No ____

- ***We reserve the right to reschedule or cancel any course that does not meet our minimum enrollment requirements. If a course is cancelled or rescheduled, all fees paid are subject to reimbursement or transference, upon presentation of a receipt.***

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SIGNATURE _____ **Date** _____