



# ASSABET VALLEY

## REGIONAL TECHNICAL HIGH SCHOOL

215 Fitchburg Street, Marlborough, MA 01752-1288



(508) 485-9430, ext. 250 ☎ 1-800-537-6663, ext. 250

### APPLICATION FOR ADMISSION - SCHOOL YEAR 2008-2009

AVRTHS  
ID# \_\_\_\_\_

- Fill out the front and back of the first page of this application and discuss the various program choices with your parent or counselor
- Parent and student sign the back of the first page of the application considering the request for voluntary information • Return it to your counselor who will provide the information required for page two • You will be scheduled for an interview

### APPLICANT INFORMATION - Please PRINT clearly *below* the titles

LAST NAME	COMPLETE FIRST NAME	COMPLETE MIDDLE NAME
STREET ADDRESS	CITY/TOWN	ZIP
TELEPHONE	DATE OF BIRTH (mo/day/yr)	
SCHOOL NOW ATTENDING	CURRENT GRADE	GRADE APPLYING FOR

### PARENT/GUARDIAN INFORMATION

NAME		
STREET ADDRESS	CITY/TOWN	ZIP
HOME PHONE	WORK OR CELL PHONE	E-MAIL

### SELECTIONS FOR EXPLORATORY PROGRAM - See description on [www.assabettech.com](http://www.assabettech.com)

INDICATE PROGRAMS IN ORDER OF PREFERENCE.      Number 1-9 (1 = first choice, 2 = second choice, etc.)		
____ Automotive Technology	____ Design & Visual Communications	____ Metal Fabrication
____ Auto Collision Technology	____ Drafting & Design Technology	____ House Carpentry
____ Facilities Management	____ Electrical Wiring	____ Painting & Design Technologies
____ Business Technology	____ Electronic Technologies	____ Plumbing
____ Computer Information Technology	____ Culinary Arts	____ Graphic Communications
____ Cosmetology	____ Health Technologies	____ HVAC & Major Appliances
	____ Precision Machining & Automated Manufacturing	

## SIGNATURE SECTION

The statement and information furnished by the undersigned in this application form are true and complete. The undersigned applicant's parent(s)/guardian(s) give permission for representatives of the sending school to release the applicant's records including grades, attendance, and conduct/discipline records.  
*Our signatures certify that we have read and agree with the above statements.*

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

## VOLUNTARY INFORMATION SECTION

The information requested in this section is not required for admissions. Submission of the information is entirely voluntary and will not affect the applicant's admission to the school. The information, if supplied, will be used for monitoring equal educational opportunity in the school district.

1. Are you Hispanic or Latino? (*Select only one*)

\_\_\_\_ No, not Hispanic or Latino

\_\_\_\_ Yes, Hispanic or Latino: a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

2. What is your race? (*You may select one or more races*)

(1) \_\_\_\_ White: a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

(2) \_\_\_\_ Black or African American: a person having origins in any of the black racial groups of Africa.

(3) \_\_\_\_ Asian: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

(4) \_\_\_\_ American Indian or Alaska Native: a person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

(5) \_\_\_\_ Native Hawaiian or Other Pacific Islander: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

3. Are you receiving special education services? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, do you need accommodations during the application process? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe \_\_\_\_\_

4. Are you receiving services under a 504-accommodation plan? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, do you need accommodations during the application process? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe \_\_\_\_\_

5. Language spoken at home \_\_\_\_\_

Do you need language assistance during the application process? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe \_\_\_\_\_

6. Check all that apply to you: Title I \_\_\_\_\_ Foster Placement \_\_\_\_\_ State Ward \_\_\_\_\_ Medicaid Eligible \_\_\_\_\_

7. Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

8. City, state and country of birth: \_\_\_\_\_

**The Assabet Valley Regional Vocational School District hereby notifies all students, parents, employees and members of the public that all school programs, activities and employment opportunities are offered without regard to race, color, sex, religion, national origin, sexual orientation, or disability. These assurances are made in compliance with federal standards: Title VI, Title IX, and Section 504.**

**ASSABET VALLEY REGIONAL TECHNICAL HIGH SCHOOL  
CANDIDATE'S CONFIDENTIAL SCHOOL SUMMARY**

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**STUDENT NAME:** \_\_\_\_\_ **CURRENT SCHOOL:** \_\_\_\_\_

**COUNSELOR NAME AND PHONE NUMBER:** \_\_\_\_\_

**Please attach the following documentation:**

**Grade 9 Applicant**

\_\_\_\_\_ **Grade 7 and 8 Report Cards**

\_\_\_\_\_ **Grade 7 and 8 Attendance Reports**

\_\_\_\_\_ **Grade 7 and 8 Discipline Reports**

**Grade 10, 11, 12 Applicant**

\_\_\_\_\_ **Previous year and current year report cards**

\_\_\_\_\_ **Previous year and current year Attendance Reports**

\_\_\_\_\_ **Previous year and current year Discipline Reports**

\_\_\_\_\_ **Official Transcript, indicating credits earned**

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**SENDING SCHOOL RECOMMENDATION**

The following is for the express use of the AV Admissions Committee. Applicants should be rated on the two characteristics below.

	<b>Excellent</b>	<b>Above Avg.</b>	<b>Average</b>	<b>Below Avg.</b>	<b>Poor</b>
<b>Achievement in Relation to Ability</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Personal Responsibility</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Counselor: Please indicate by your signature below that this application is complete, including **student and parent signatures, grades, attendance, conduct/discipline reports and recommendation**. Assabet Valley Regional Technical High School appreciates your time and effort in processing this application.

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**COUNSELOR'S SIGNATURE**

**DATE**