

# EAST PROVIDENCE AREA CAREER AND TECHNICAL SCHOOLS APPLICATION STUDENT DATA REQUEST FORM

(Please print using ink or type.)

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

PRESENT SCHOOL: \_\_\_\_\_

COUNSELOR'S NAME: \_\_\_\_\_

IF NOT IN SCHOOL, LAST SCHOOL ATTENDED: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ DATE LEFT: \_\_\_\_\_

PARENT/GUARDIAN'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

ENTERING GRADE: \_\_\_\_\_

CAREER & TECH. PROGRAM CHOICE: #1 \_\_\_\_\_

#2 \_\_\_\_\_

#3 \_\_\_\_\_

The nine Rhode Island Area Career and Technical Schools encourage all students to make their selections of career and technical programs based on what they think their interests and abilities are.

SIGNATURE OF STUDENT : \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

STUDENT EMAIL: \_\_\_\_\_ PARENT EMAIL: \_\_\_\_\_

(Acknowledgement of Participating School Officials)

COUNSELOR'S SIGNATURE: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

SUPERINTENDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

The network of the nine (9) Rhode Island Career and Technical Centers does not discriminate on the basis of age, sex, sexual orientation, race, religion, national origin, color or disability in accordance with applicable laws and regulations. Rhode Island regulations governing the operation of the career and technical centers ensures that every student has the right to apply, to be considered for admission and placement, and that the sending community is required to pay the tuition and transportation of all students who are enrolled in the career and technical schools.

NOTE: This form must be received at the area career and technical school by **March 15th** in order for the applicants to be guaranteed consideration for placement.

1. Student Copy      2. Career & Technical Center      3. Guidance Office      4. Superintendent's Office