

**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
DEPARTMENT OF CAREER AND TECHNICAL EDUCATION  
APPLICATION FOR ADMISSION**

In order to be considered for admission, you must:

- Sit for the Stanford 10 Diagnostic Test at Davies in **December**.
- Complete and mail a signed application to be received by **Feb 1st** to:

**William M. Davies, Jr. Career and Technical High School  
50 Jenckes Hill Road  
Lincoln, Rhode Island 02865  
(401) 728-1500 FAX: (401) 725-8714**

*The William M. Davies, Jr Career and Technical High School does not discriminate on the basis of age, sex, race, religion, national origin, color, sexual orientation, or disability.*

**INSTRUCTIONS**

Complete this application with the appropriate signatures and return it to your guidance counselor or mail it directly to Davies High School (*see above address*). The completed application must be received by Davies no later than **February 1<sup>st</sup>** for consideration for admission. If any further information is needed, your guidance counselor will forward it to us. If you **do not** take the Stanford 10 Diagnostic Test, you **will not** be considered for admission.

*You will be notified by **February 15<sup>th</sup>** if you have been accepted for admission to Davies.*

**STUDENT NAME:** \_\_\_\_\_

**SENDING DISTRICT:** \_\_\_\_\_

**GRADE TO WHICH YOU ARE APPLYING:** \_\_\_\_\_

*(For Office Use Only)*

APPLICATION RECEIVED:

**PERSONAL INFORMATION**

**FULL NAME:** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE INITIAL)

**ADDRESS:** \_\_\_\_\_  
(NUMBER & STREET) (APT/FLOOR)  
\_\_\_\_\_  
(CITY/TOWN) (ZIP CODE)

**MAILING ADDRESS (if different):** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

**BIRTH DATE:** \_\_\_\_\_  
(MO/DAY/YEAR)

**FATHER/GUARDIAN'S NAME:** \_\_\_\_\_

**ADDRESS IF DIFFERENT:** \_\_\_\_\_

**MOTHER/GUARDIAN'S NAME:** \_\_\_\_\_

**ADDRESS IF DIFFERENT:** \_\_\_\_\_

**GENERAL INFORMATION**

**TECHNICAL AREAS OF INTEREST:**

1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_

**IF NOT PRESENTLY IN SCHOOL, NAME OF SCHOOL MOST RECENTLY ATTENDED**

\_\_\_\_\_

**CIRCLE HIGHEST GRADE COMPLETED      8      9      10**

**LANGUAGE**

What language is spoken the most by your parents/guardians or other persons living in your home?

\_\_\_\_\_

What language do you speak the most at home? \_\_\_\_\_

**Ethnicity:**

Is your child Hispanic or Latino?                    \_\_\_ Yes            \_\_\_ No

**Race:**

What is your child's race (choose one or more)

\_\_\_\_\_ American Indian or Alaskan Native

\_\_\_\_\_ Asian

\_\_\_\_\_ Black or African American

\_\_\_\_\_ Native Hawaiian or Other Pacific Islander

\_\_\_\_\_ White

Both Ethnicity and Race information must be answered.

**SEX**            \_\_\_\_\_ Male                    \_\_\_\_\_ Female

**SOCIAL SECURITY NUMBER**                    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**RELEASE OF RECORDS**

I approve this application and agree to encourage punctuality and regular attendance. I hereby give permission for the \_\_\_\_\_ School to release the school records of \_\_\_\_\_ to the William M. Davies, Jr. Career and Technical High School for the purpose of application/admission/placement at that school. Such records include, but not limited to, course grades, standardized test results, Individualized Learning Plans (IEP's), attendance records, school health record, record of extracurricular activities, conduct reports, and evaluation reports such as psychological/educational evaluations.

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**