

**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 Diagnostic Test at Davies in **January**.
- Complete and mail a signed application to be received by **March 15th** to:

**William M. Davies, Jr. Career and Technical High School
50 Jenckes Hill Road
Lincoln, Rhode Island 02865
(401) 728-1500 FAX: (401) 728-8910**

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 **March 15** 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 Diagnostic Test, you **will not** be considered for admission.

*You will be notified by **May 15** 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: _____ PLACE OF BIRTH: _____
(MO/DAY/YEAR) (CITY/TOWN) (STATE)

FATHER/GUARDIAN'S NAME: _____

ADDRESS IF DIFFERENT: _____

MOTHER/GUARDIAN'S NAME: _____

ADDRESS IF DIFFERENT: _____

IN CASE OF EMERGENCY CONTACT:

(LAST NAME) (FIRST NAME) (RELATIONSHIP)

EMERGENCY PHONE: _____

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

(Information provided by an applicant concerning his or her national origin, race, gender or primary language spoken in the home is a voluntary submission for record-keeping purposes and will not be used as a factor in the selection process.)

PRIMARY LANGUAGE

What language did you learn to speak first? _____

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? _____

RACE OR ETHNIC GROUP

_____ American Indian or Alaskan Native

_____ Asian American or Pacific Islander

_____ African American

_____ Hispanic

_____ White

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