

**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 **November/December/January**.
- Complete and mail a signed application to be received by **Feb 1st** to:

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

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

INSTRUCTIONS

Complete this application with the appropriate signatures and return it by mail (*faxes not accepted*) directly to Davies High School (*see above address*). The completed application must be received by Davies no later than **February 1st** for consideration for admission. If you **do not** take the Stanford 10 Diagnostic Test, you **will not** be considered for admission.

STUDENT NAME: _____

CURRENT SCHOOL NAME: _____

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?

Both
Ethnicity
& Race
must be
answered

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

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