



# Connecticut Technical High School System Application for Student Admission

www.cttech.org

## Instructions

To be considered for admission to a Connecticut Technical High School, you and your child must complete this application with the appropriate signatures and return it to your school counselor, principal or teacher. Your school counselor will complete the sending school section of this application and forward your application, transcript of grades, attendance and discipline infractions to the Connecticut Technical High School. Incomplete applications will not be processed.

Your school must supply the Technical High School with the following data:

**9<sup>th</sup> grade admission**

**10<sup>th</sup> grade admission**

Grade 7 Connecticut Mastery Test as reported on the Student Score Report  
A record of previous (7<sup>th</sup> grade) and current attendance (8<sup>th</sup> grade)  
A transcript of previous (7<sup>th</sup> grade) and current grades (8<sup>th</sup> grade); and  
A record of previous and current discipline infractions.

Grade 8 Connecticut Mastery Test as reported on the Student Score Report;  
A record of previous (8<sup>th</sup> grade) and current attendance (9<sup>th</sup> grade);  
A transcript of previous (8<sup>th</sup> grade) and current grades (9<sup>th</sup> grade);  
A record of previous and current discipline infractions; and  
Completed and passed Algebra I.

Parent and student applicant must complete pages 1, 2 and 3 and the child must complete the extra-curricular activities and reasons why he/she wants to attend CTHSS section (page 3) of the application and

**Note: If your child has not completed the Grade 7 Connecticut Mastery Test (CMT) in Mathematics and Reading or you are a non-public school applicant you must arrange to take an alternative assessment with the Technical High School. Please contact the Technical High School for dates.**

Student Applicant's Name: \_\_\_\_\_

Grade Level \_\_\_\_\_

Current School Attending: \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Home Schooled:  Yes  No

Technical High School ranked in order of preference

Grade Applying for 9 \_\_\_\_\_ 10 \_\_\_\_\_

List Trade Interest in rank order 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

*It is the policy of the Connecticut Technical High School System that no person shall be excluded from participation in, denied the benefits of, or otherwise discriminated against under any program, including employment, because of race, color, religious creed, sex, age, national origin, ancestry, marital status, sexual orientation, or disability (including, but not limited to, mental retardation, past or present history or mental disorder, physical disability or learning disability), genetic information, or any other basis prohibited by Connecticut state and/or federal nondiscrimination laws. The Connecticut Technical High School System does not unlawfully discriminate in employment and licensing against qualified persons with a prior criminal conviction. Inquiries regarding the Connecticut High School System's nondiscrimination policies and practices should be directed to Patricia A. Ciccone, Superintendent of Schools, Connecticut Technical High School System, 25 Industrial Park Road, Middletown, CT 06457, and/or, regarding race, color, national origin, age, sex and/or disability to the Office for Civil Rights, U.S. Department of Education, Boston, MA 02110-1491, telephone 617.289.0111, fax 617.289.0150, TTY/TDD 877.521.2172. The Connecticut Technical High School System is an equal opportunity/affirmative action employer.*

**Office Use Only**

Language Arts Test Score \_\_\_\_\_

Mathematics Test Score \_\_\_\_\_

Grades \_\_\_\_\_

Attendance \_\_\_\_\_

Interest Statement \_\_\_\_\_

Activities \_\_\_\_\_

Home School Essay \_\_\_\_\_

**Total** \_\_\_\_\_

This application requests information about your national origin, gender, racial or ethnic group, and primary language spoken in the home. Providing this information is voluntary. The information you do provide will be used for record-keeping purposes only; it will not be used as a factor in any action concerning education, activities or employment.

### Personal Information

To be completed by the student applicant and parent/guardian

Full Name:

\_\_\_\_\_ (Last) (First) (Middle)

Gender:  Male  Female

Applicant's Birth Date: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
(Month/Day/Year) (City) (State)

Racial or Ethnic Group:

Is the applicant Hispanic/Latino? Yes  No

Is the applicant from one or more races use the following (choose all that apply):

- |                                   |                          |   |                          |
|-----------------------------------|--------------------------|---|--------------------------|
| American Indian or Alaskan Native | <input type="checkbox"/> | Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> |
| Asian                             | <input type="checkbox"/> | White                                     | <input type="checkbox"/> |
| Black or African American         | <input type="checkbox"/> |   |                          |

Residence Address:

\_\_\_\_\_ (Box, Apartment, Street Name and Number)

\_\_\_\_\_ (City or Town) (State) (Zip Code)

Mailing Address:

(If different from residence address) \_\_\_\_\_ (Box, Apartment, Street Name and Number)

\_\_\_\_\_ (City or Town) (State) (Zip Code)

Home Phone:

Other Phone:

- With Whom Do You Live?
- |  |   |
|--|---|
| <input type="checkbox"/> Mother and Father     | <input type="checkbox"/> Mother                       |
| <input type="checkbox"/> Father and Stepmother | <input type="checkbox"/> Father                       |
| <input type="checkbox"/> Mother and Stepfather | <input type="checkbox"/> Legal Guardian               |
|  | <input type="checkbox"/> Other (Please specify below) |

\_\_\_\_\_ (Last Name) (First Name) (Relationship to the Applicant)

Father/Guardian's Name: \_\_\_\_\_  
(Last) (First) (Middle)

Father/Guardian's Address if Different: \_\_\_\_\_  
(Number and Street)

\_\_\_\_\_ (City or Town) (State) (Zip Code)

Father/Guardian's Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Mother/Guardian's Name: \_\_\_\_\_  
(Last) (First) (Middle)

Mother/Guardian's Address if Different: \_\_\_\_\_  
(Number and Street)

\_\_\_\_\_ (City or Town) (State) (Zip Code)

Mother/Guardian's Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent's E-mail Address and Name: \_\_\_\_\_

**Emergency Contact (1)**

\_\_\_\_\_  
(Last Name) (First Name) (Relationship to the Applicant) (Phone)

**Emergency Contact (2)**

\_\_\_\_\_  
(Last Name) (First Name) (Relationship to the Applicant) (Phone)

**Applicant's Primary Language:**

What language did you learn to speak first? 1. \_\_\_\_\_

What language do you speak the most at home? 2. \_\_\_\_\_

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

**To be completed by student only. Please list activities-clubs & organizations, sports and community involvement:**

List	Describe Involvement
1.	
2.	
3.	
4.	
5.	

**To be completed by student only. Describe the reasons why you want to attend a technical high school:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Release of Records**

I approve this application and I, the undersigned, hereby give permission for the \_\_\_\_\_  
School to release the \_\_\_\_\_ (Name of school)

School records of \_\_\_\_\_ to Connecticut Technical High School System for the purpose of admission/placement  
(Student applicant's name)

at that school. Such records include, but are not limited to, course grades, discipline records, standardized test results, 504 Plans, IEP and/or PPT records, attendance records, school health records, records of extracurricular activities and psychological reports.

\_\_\_\_\_  
Signature of Parent/Guardian Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant Date: \_\_\_\_\_

# School Information to be Completed by the Sending School

Incomplete applications will not be processed

Student Name: \_\_\_\_\_

Applicant's State Assigned Student ID (SASID):

## Academic Information

Attach 7<sup>th</sup> grade final reports card and 8<sup>th</sup> grade 1<sup>st</sup> marking period (transcript) and the student applicant's Grade 7 CMT results (for 9<sup>th</sup> grade admission) or Attach 8<sup>th</sup> grade final reports card and 9<sup>th</sup> grade 1<sup>st</sup> marking period (transcript) and the student applicant's Grade 8 CMT results. (for 10<sup>th</sup> grade admission)

Achievement Record	Previous Grade Final Average	Current Grade Term 1	The student applicant final transcript, ELL program records, 504 plan, special education records, and health records are required at the end of the year but no later than July 8 for all accepted applicants.
Mathematics			
Science			
English			
Social Studies			
Absences			Acceptance is contingent upon successful completion of current grade and promotion to the next grade.

## Student Applicant's Behavior

Please provide the following **required** discipline information on the above named student. **Please attach the student's complete discipline record.**

- Has this student participated in a violent criminal offense, as determined by State Law, while in or on the grounds of a school?  Yes  No
- Has this student committed a gun-free schools violation (possession of a firearm or explosive device that resulted in expulsion)?  Yes  No
- Has this student participated in an "other weapon" incident resulting in expulsion?  Yes  No
- Does this student have any other discipline infractions (dangerous or criminal offenses)?  Yes  No

## Gifted and Talented

Has this student been identified as gifted or talented? If yes, please check Gifted  Talented

## Special Education, 504 and Support Services

Does the student receive any special education services?  Yes  No

If yes, date of last triennial evaluation: \_\_\_\_\_

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

Has the student been identified as 504 eligible and receive services?  Yes  No

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

Does the student receive any support services other than special education?  Yes  No

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

## ELL (English Language Learner) Support Services

Does the student receive bilingual services?  Yes  No If yes, date bilingual services began: \_\_\_\_\_

Does the student receive ELL services?  Yes  No If yes, date ESL program services began: \_\_\_\_\_

**If you answered yes to any of the above ELL support services questions, you must attach the complete Language Assessment Scale (LAS LINKS) Grade 8 Student Report.**

Do you recommend this applicant for admission?  Yes  No

Please explain: \_\_\_\_\_

School Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_