



# KEEFE REGIONAL TECHNICAL SCHOOL

## ADMISSIONS APPLICATION

### RECORDS RELEASE

The undersigned applicant's parent(s)/guardians(s) give permission for representatives of the sending school to release the applicant's records including, grades, attendance, conduct/discipline records, as well as any other pertinent information that may be required by Keefe Regional Technical School for the purpose of admission.

My signature certifies that I have read and agree with the above statements.

Guidance Department  
Keefe Regional Technical School  
750 Winter Street  
Framingham, MA 01702

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### The following information is to be completed & signed by the Applicant's School Counselor or School Representative

Has the applicant ever been suspended or expelled from school for assault, for violation of drug or weapons regulations, or for posing a danger to other students?

Yes  No

If yes, please explain \_\_\_\_\_

### LOCAL SCHOOL COUNSELOR'S RECOMMENDATIONS

The form will be used by sending school personnel to document each applicant for admission to Keefe Regional Technical School. Per the Keefe Technical Admission Policy, 10 points maximum can be given to applicants as follows:

	Points	
<input type="checkbox"/> Excellent	10	Student is highly motivated, demonstrates excellent leadership skills
<input type="checkbox"/> Above Average	8	Student is very motivated, has good attitude toward school
<input type="checkbox"/> Average	6	Student successfully completes tasks and shows good attitude toward school
<input type="checkbox"/> Below Average	4	Student is not motivated and attitude toward school and/or behavior is problematic
<input type="checkbox"/> Poor	2	Student is not motivated to attend school or to do assigned school work

\_\_\_\_\_

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Sending School \_\_\_\_\_

Sending School Personnel Name \_\_\_\_\_

**Directions for Applicant:** Complete all required information on this application form (please print or type in the spaces provided).

**Return completed form:** Guidance Department  
Keefe Regional Technical School  
750 Winter Street  
Framingham, MA 01702

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Date \_\_\_\_\_

Keefe Regional Technical School has a published admission policy that is made available to all applicants and parents(s)/guardian(s). The policy gives the admission criteria, as well as a description of the entire admission process.

This application form must be completed and submitted to the Keefe Technical School Guidance Office. In addition to this application form, the applicant's current school counselor must submit documents that will be used for admission that includes the applicant's grades, attendance record and discipline/conduct record. For fall admission, this would be terms 1 & 2 of the current school year and terms 1-4 of the previous school year. In addition to grades, attendance and discipline/conduct, the current school counselor's recommendation is also included on this application. For admissions purposes a fifth criteria consisting of an interview with the applicant will be factored into the admissions decision. Grade 9 interviews may take place at the sending middle school during the school day.

#### FOR OFFICE USE ONLY

Admission Status	<input type="checkbox"/> Accept <input type="checkbox"/> Wait List
Interview	_____
Grades	_____
Attendance	_____
Discipline	_____
Recommendations	_____
Total	_____



Keefe Regional Technical School is committed to ensuring that all of its programs and facilities are accessible to all members of the public. We do not discriminate on the basis of age, color, disability, gender identity, national origin, race, religion, sex, sexual orientation, or homelessness.

**STUDENT INFORMATION** *To be completed by student*

**Permanent Home Address**

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current School \_\_\_\_\_ Grade \_\_\_\_\_

**Mailing Address** *(if different from above)*

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**What grade are you applying for?** \_\_\_\_\_

If you're applying for Grades 10, 11, or 12, what Career & Technical Programs would interest you?  
*(Please list your preferences by placing a 1, 2, or 3 next to the chosen programs)*

- Automotive Technology     Early Childhood Education & Teaching     Legal & Protective Services
- Carpentry     Electrical     Information Technology
- Cosmetology     Health Careers     Metals Technology
- Culinary Arts     Horticulture & Landscape Management     Plumbing
- Dental Assisting     Graphic Communications     Programming & Web Development
- Design & Visual Communications    *(only classes of 2021 and 2022)*

**VOLUNTARY INFORMATION SECTION** *To be completed by Parent/Guardian*

This information requested in this section is not required for admission. Submission of the information is entirely voluntary. Information submitted voluntarily by the applicant will not affect the applicant's admission to the school. The information, if supplied, will be used for monitoring equal educational opportunity in the school district. In addition, note that applicants with disabilities may voluntarily self-identify for the purpose of requesting reasonable accommodations during the entire application and admission process. Applicants who are English language learners or limited English proficient may voluntarily self-identify for the purpose of receiving interpretive services during the entire application and admission process.

**Person with disability**

Yes     No

If yes, please describe the accommodations needed *(if none, please leave blank)*

\_\_\_\_\_

**Language Spoken by Student** \_\_\_\_\_

**Language Spoken by Parent** \_\_\_\_\_

**Person who is an English language learner or limited English proficient**

Yes     No

If yes, please describe the assistance needed *(if none, please leave blank)*

\_\_\_\_\_

**VOLUNTARY INFORMATION SECTION CONTINUED** *To be completed by Parent/Guardian*

**Gender**

Male     Female    Place of Birth \_\_\_\_\_

**Ethnic Designation** *(please fill in BOTH the ethnicity and race areas)*

**Ethnicity** *(select one)*

- Hispanic or Latino: a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture origin, regardless of race.
- Not Hispanic or Latino

**Race** *(select one or more)*

- White: a person having origins in any of the original people of Europe, the Middle East, or North African.
- Black or African American: a person having origins in any of the black racial groups of Africa.
- American Indian or Alaska Native: a person having origins in any of the original people of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian: a person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- Native Hawaiian or Other Pacific Islander: a person having origins in any of the original people of Hawaii, Guam, Samoa or other Pacific Islands.

**CONTACT INFORMATION**

**Emergency Contact Person** *(other than parent)* \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Phone \_\_\_\_\_

**Emergency Contact Person** *(other than parent)* \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Phone \_\_\_\_\_

**Father** \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

**Mother** \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

**Guardian** \_\_\_\_\_ Relationship \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

**Parent or Guardian** *(not living with student)* \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_