

Rockland BOCES Career and Technical Education Center (CTEC)

65 Parrott Road, West Nyack, NY 10994 (845) 627- 4770 Fax: (845) 623-3412

STUDENT INFORMATION (please print)

Name: _____ Date of Birth: _____ Month _____ Day _____ Year _____
Last First MI

Gender: Male _____ Female _____ Social Security Number: _____

Home Address: _____
Street Apt # City State Zip Code

Home Phone: _____ Student's Cell: _____ Email: _____

Name of Parent/Guardian that student lives with: Mr. Mrs. Ms. Miss _____

Work Phone: _____ Cell Phone: _____ Email: _____

Emergency Contact Name if Parent/Guardian listed above can't be reached: _____

Relationship: _____ Phone: _____ Cell: _____

DATA FOR STATE REPORTING & PARENT/GUARDIAN PERMISSION

In order to gain special funding from NY State, Rockland BOCES needs to report the following information to NYS Education Dept. The money is used for special programs to help our students achieve greater success. The information will be reported in totals. Individual student information will be kept on file and will not be used for any other purpose.

Student's Race/Ethnicity: _____ American Indian/Alaskan Native _____ Black/African American _____ Hispanic/Latino
_____ Native Hawaiian/Other Pacific Islander _____ White _____ Asian _____ Two or More Races

Does student have children? Yes _____ No _____ Is student married? Yes _____ No _____ Does student receive free or reduced lunch? Yes _____ No _____

Is English the language spoken at home? Yes _____ No _____ If no, what language do you speak at home? _____

I approve of my son's/daughter's application to the Career & Technical Education Center (CTEC). I am aware that he/she will attend one half day in the home school and one half day at CTEC. Permission is granted for him/her to participate in any lab/shop activity in the program. I also agree to supply him/her with uniforms and equipment if required in the course selected. Cooperation with the staff of the home high school and that of CTEC to maintain good attendance is assured. Credits earned will be applied for graduation from the high school. Transportation to and from CTEC will be provided. I give permission for the home school to send to CTEC appropriate school records, including my son's/daughter's CSE records, current IEP, psychological and medical reports.

Should an emergency arise that requires immediate action, I authorize BOCES to take my child to the nearest emergency first aid station or hospital by ambulance, if necessary. I realize that the school district cannot assume responsibility for the payment of medical fees or expenses incurred.

Student Signature: _____ Parent/Guardian Signature: _____

Rockland BOCES offers educational opportunities without regard to sex, race, color, national origin, or handicap. Inquiries regarding this nondiscrimination policy may be directed to Title IX, Section 504 Coordinator, Rockland BOCES, 65 Parrott Rd., West Nyack, NY 10994.

HOME SCHOOL TO COMPLETE THE FOLLOWING INFORMATION

High School: _____ Today's Date: _____ Current Grade: _____

Home School Student ID #: _____ Has Student Previously Attended CTEC? Yes _____ No _____
(Needed For Srs Reporting)

C.S.E. Placement? Yes _____ No _____ (If Yes, IEP/504 ACCOMMODATIONS MUST BE ATTACHED)***

Program Selected: _____ CTE _____ CSP Course Selected: _____ AM _____ PM
(CSP For Special Needs Students Gr. 9-12) Course Selected: _____ AM _____ PM

Integrated Academics Selected: (Eng 12, Applied Science, Applied Math, Art, and PIG credits are only available in certain programs.)

_____ Career & Financial Mgt (1 credit) _____ Applied Math (1/2 credit) _____ Health (1/2 credit) _____ Art (1 credit-Graphic Design Only)
_____ Occupational Math (1 credit) _____ Applied Science (1/2 credit) _____ English 12 (1/2 credit) _____ Phys. Ed. (1/2 credit)
_____ Occupational Science (1 credit) _____ Participation In Government (1/2 credit-Criminal Justice Only)

Regents Scores: _____ English _____ Math A _____ Science _____ Global _____ American History

Guidance Counselor's Signature _____

Telephone Number _____

To Guidance Counselor: Please return the approved application to CTEC Guidance Dept (retaining Parent & School copies for your records).

CTEC Guidance Copy - WHITE

Parent Copy - YELLOW

Home School Copy - PINK