

Franklin Delano Roosevelt High School

Rick Pardy, Principal
Daniel J. Cowan, Assistant Principal
Michael C. Ruella, Assistant Principal
Joseph Sullivan, Assistant Principal



P.O. Box 2032
Hyde Park, New York 12538

Dear Parent and Student,

I am pleased that you have shown interest in attending one of the occupationally related programs that are available at the Career and Technical Institute (CTI) at Dutchess County BOCES. It is important to understand that there is an application process that must be followed in order to be a strong candidate for placement at CTI.

First, to be considered for a spot at CTI next year, you must complete the bottom section of this form; be sure to sign your name and get your parent's signature as well. Please note that you must have 5 teachers recommend you. (PE, Art, Music or Health can be used as the elective teacher.)

Then, when you have done your part of this form, bring it to your Counselor who will complete the remaining section. Students earn "points" for being in good standing in their classes, for having good attendance and for consistently following school rules and policies. Mr. Cowan will use this point system to determine which students will be scheduled into BOCES programs for next year. All other students will be placed on a "Wait List". Improved grades, attendance and behavior will help these students to eventually secure placement at BOCES.

Last, you must fill out the white application form that goes to BOCES. This form also requires your signature and your parent's signature. **Both the FDR and BOCES application must be submitted to your school Counselor by Monday, February 11th. Applications received in the Guidance Office after February 11th will be placed on the "Wait List".**

If you have any questions regarding the application process, please call the Guidance Department at 229-4020 ext 6860, 6861 or 6862.

Sincerely,

Rick Pardy, FDR Principal

FDR BOCES APPLICATION

-----*Student Section*-----

TEACHER RECOMMENDATION

- 4 points – Student works to his/her full capacity and exhibits exemplary behavior in class
- 3 points – Student is a hard-worker and is well-behaved in class
- 2 points – Student completes work but is capable of better and exhibits average behavior in class
- 1 point – Student lacks motivation to work up to his/her potential and is a distraction in class

Math teacher recommendation ____
Teacher signature _____
Teacher name print _____

English teacher recommendation ____
Teacher signature _____
Teacher name print _____

Science teacher recommendation ____
Teacher signature _____
Teacher name print _____

S. S. teacher recommendation ____
Teacher signature _____
Teacher name print _____

Elective teacher recommendation ____
Elective teacher signature _____
Teacher name print _____

Student name _____

Parent/Guardian name _____

Student signature _____

Parent/Guardian signature _____

Guidance Section
For Guidance Use Only

ATTENDANCE

4 points	0 unexcused absences
3 points	1 – 3 unexcused absences
2 points	4 – 7 unexcused absences
1 point	8 – 10 unexcused absences
0 points	More than 10 unexcused absences

DISCIPLINE

4 points	0 referrals
3 points	1 – 3 referrals
2 points	4 – 7 referrals
1 point	8 – 10 referrals
0 points	More than 10 referrals

GRADES

4 points	Passing all classes
3 points	Failing 1 class
2 points	Failing 2 classes
1 point	Failing 3 classes
0 points	Failing more than 3 classes

TEACHER RECOMMENDATION

Average teacher recommendation score _____

STUDENT ATTENDED BOCES VISIT

Date attended _____

Does this student have an IEP? Yes _____ No _____

TOTAL POINTS _____

Career and Technical Institute
Board of Cooperative Educational Services
2019-2020 Application for Enrollment

Date Received at CTI: _____

PERSONAL INFORMATION

Student's Full, Legal Name: Last _____ First _____ MI _____

Student Home Address: Street _____

City _____ State _____ Zip Code _____

Mailing Address: (P.O. Box or Street) _____ City/State/Zip: _____

Home Phone Number: _____ Student Cell Phone Number: _____

Student Home e-mail Address: _____ Date of Birth: _____ Gender: Male Female

Parent or Guardian 1 _____ Parent or Guardian 2 _____

Does the Student Live with This Person: Yes No Does the Student Live with This Person: Yes No

Relationship to Student _____ Relationship to Student _____

Parent/Guardian e-mail _____ Parent/Guardian e-mail _____

Home() _____ Work() _____ Cell() _____ Home() _____ Work() _____ Cell() _____

Emergency Contact _____ Relationship to Student _____ Phone (Home/Work/Cell) _____

PROGRAM INFORMATION

School Year: 2019-2020 Grade Level for Indicated School Year: _____

District: _____ School: _____

Resident District: _____ Sending School Counselor: _____

Student Grade 9 Entry Date: _____ Student's Expected Graduation Date: _____

Indicate your first, second and third choices using 1, 2 and 3.

- | | | |
|--|--|--|
| ___ Auto Mech & Tech Training I (PM) M | ___ Culinary Arts/Restaurant Mgt. I (PM) M | ___ Security and Law Enforcement I (PM) PE S |
| ___ Auto Mech & Tech Training II (AM) M | ___ Culinary Arts/Restaurant Mgt. II (AM) M | ___ Security and Law Enforcement II (AM) PE S |
| ___ Autobody Collision & Refinishing I (PM) M | ___ Early Childhood Education I (PM) M | ___ Small Engine Technology I (PM) M |
| ___ Autobody Collision & Refinishing II (AM) M | ___ Early Childhood Education II (AM) M | ___ Small Engine Technology II (AM) M |
| ___ Career Exploratory Program (PM) | ___ Graphic Design I (PM) | ___ TV/Film Production I (PM) |
| ___ Computer Hardware Technology (PM) M | ___ Graphic Design II (AM) | ___ TV/Film Production II (AM) |
| ___ Computer Networking (AM) M | ___ Introduction to Health Occupations (PM) | ___ Trade Electricity I (PM) M S |
| ___ Construction Trades I (PM) M | ___ Nursing Assistant (AM) S | ___ Trade Electricity II (AM) M S |
| ___ Construction Trades II (AM) M | <i>prospective students must have completed IHOC</i> | ___ Careers in Animal & Plant Sciences II (AM) M S |
| ___ Cosmetology I (PM) S | ___ Practical Nursing I (PM) | ___ Careers in Animal & Plant Sciences I (PM) M S |
| ___ Cosmetology II (AM) S | <i>prospective students must test successfully to place in program</i> | ___ Welding I (PM) S |
| | | ___ Welding II (AM) S |

Academic Requests: MST - Math MST -- Science

All programs, except Career Exploratory, include a 1/2 credit ELA per year. Other academics as indicated: M - Math, S - Science, PE - Phys. Ed.

Counselor Remarks: _____

DEMOGRAPHIC and SPECIAL EDUCATION INFORMATION

Student's Current Diploma Track: Regents Local High School Equivalency CDOS Credential Skills & Achievement CC

English Language Learner (ELL): Yes No *(If Yes, please attach NYSITELL or NYSESLAT Documentation)*

Primary Language Spoken at Home: _____

Is Student a Migrant: Yes No Is Student Economically Disadvantaged: Yes No Is Student a Single Parent: Yes No

Is Parent a Displaced Homemaker: Yes No Is the Student of Hispanic Origin: Yes No

Student Ethnicity: American Indian or Alaska Native Asian Black or African American Native Hawaiian/Other Pacific Islander White

Student Place of Birth: City _____ State _____ Country _____

Does this Student have an IEP: Yes No Does this Student have a 504 Plan: Yes No Has this Student been Declassified: Yes No
(If Yes, supporting documentation must be shared via IEP Direct).

***Please Note: the Home School Nurse Section is now on page 3 of 3**

SIGNATURES

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

School Counselor or District Representative Signature: _____ Date: _____

THIS FORM MUST BE FILLED OUT COMPLETELY. The Enrollment Application cannot be processed if all requested information is not provided. *Please make sure page 3 Home School Nurse Section is complete.

Student Name: _____ Home School: _____ Counselor: _____

HOME SCHOOL NURSE SECTION

****PLEASE PRINT CLEARLY****

Is there any Condition that Requires Special Care: Yes No

List any Acute or Chronic Illnesses or Medical Conditions: _____

Allergies: _____

Medications: _____

Immunization Information: Complete this section noting the current status of the applicant under NYS PHL Article 21, Title VI, Sections 2164 & 2168 regarding the most current Immunization Requirements for School Entrance/Attendance.

Circle Yes or No:

Immunizations Complete YES NO

Immunizations in Process YES NO

Medical Exempt YES NO

Religious Exempt YES NO

Date of Last Tetanus Injection: _____

Home School Nurse Signature: _____ Date: _____

