

PLEASE CHECK ONE

Joseph M. Barry Career & Technical Education Center

- Cultural Arts Center (CAC)
 English Language Alternative Program (ELAP)
 Program for Alternative Comprehensive Education (PACE)
 Positive Alternative Twilight School (PATHS)
 Springboard
 Teenage Parenting Program (TAP)

High School Student Application Form • 2007-2008

FOR NASSAU BOCES HIGH SCHOOL PROGRAMS

PLEASE CHECK ONE

- Enrollment
 Dist. Transfer

Print or Type

—Student/Parent Information—

Student's Last Name		Student's First Name		MI	Student's Signature	
Address			Apartment No.	Home Telephone		
City			Zip	Work Telephone		
Gender	Date of Birth	Social Security Number		Parent's Cell Phone		
Parent's or Guardian's Last Name, First Name		Parent's or Guardian's Signature		Relationship to Student	Parent or Guardian's Native Language	
Parent's e-mail			Student's e-mail			

—School Information—

Billing District	High School Attending/School Building	Date of Entry to District	Class of	Grade as of 9/1/07
School Building Address		Principal's Name		

Answer all questions. Attach required student records and complete page 2.

Does applicant have any physical limitations? If yes, please attach report.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	ESL
Is the applicant currently classified by the home school district Committee on Special Education?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Is the student receiving ESL services? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has the applicant ever been declassified by the Committee on Special Education? Date Declassified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	IF YES, ESL LEVEL: <input type="checkbox"/> Beginning <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Does the applicant have a 504 Accommodation Plan? Please attach.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Native Language _____
Is the applicant currently eligible for free or reduced lunch?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Does the student have access to a computer at home? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the applicant receiving Title I services? Which subjects?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is the applicant receiving supplemental educational services? Which subjects?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Verify with check mark (✓), that copies of all these items are attached:

Attendance Records Health & Immunization Records Report Cards Transcript Psychological IEP (2 copies) Copies of any CSE Documents

BARRY TECH APPLICANTS ONLY

Career Education Course Requested	Second Choice	CTE Placement	Session
		Regular <input type="checkbox"/> ESL <input type="checkbox"/> Intensive Skills <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>
State Approved Integrated Course(s) Requested:		See catalogue for list of embedded courses.	
Has student participated in a Vocational Assessment? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please attach.			

Home School Nurse's Signature	Phone #	Date
Home School Guidance Counselor's Signature	Email Address	Phone #
Authorizing School Official's Signature	Phone #	Date

ALL APPLICANTS

Completed Academic Courses and Regents Exams: (Please check all that apply)

Official Transcript must be attached.

English 9 <input type="checkbox"/>	English 10 <input type="checkbox"/>	English 11 <input type="checkbox"/>	English 12 <input type="checkbox"/>	English Regents <input type="checkbox"/>	Total English Credits:
Global 9 <input type="checkbox"/>	Global 10 <input type="checkbox"/>	Global Regents <input type="checkbox"/>	US History <input type="checkbox"/>	US History Regents <input type="checkbox"/>	Total Social Studies Credits:
Participation in Government <input type="checkbox"/>	Economics <input type="checkbox"/>				
Math A I <input type="checkbox"/>	Math A II <input type="checkbox"/>	Math A III <input type="checkbox"/>	Math A Regents <input type="checkbox"/>	Intro to Math B <input type="checkbox"/>	Math B <input type="checkbox"/>
Math B Regents <input type="checkbox"/>	Other: _____ <input type="checkbox"/>				Total Math Credits:
Earth Science <input type="checkbox"/>	Earth Science Regents <input type="checkbox"/>	Living Environment <input type="checkbox"/>	Living Environment Regents <input type="checkbox"/>		
Chemistry <input type="checkbox"/>	Chemistry Regents Exam <input type="checkbox"/>	Other: _____ <input type="checkbox"/>	Other: _____ <input type="checkbox"/>		
PE 9 <input type="checkbox"/>	PE 10 <input type="checkbox"/>	PE 11 <input type="checkbox"/>	PE 12 <input type="checkbox"/>	Health <input type="checkbox"/>	Total PE/Health Credits:
Reading RCT <input type="checkbox"/>	Writing RCT <input type="checkbox"/>	Math RCT <input type="checkbox"/>	Geography RCT <input type="checkbox"/>	US History RCT <input type="checkbox"/>	Science RCT <input type="checkbox"/>

(Please check appropriate box(es)) ACADEMIC SERVICES REQUESTED						
<input type="checkbox"/> None	<input type="checkbox"/> Applied Math (1 credit)	<input type="checkbox"/> Math RCT Support (non-credit)	<input type="checkbox"/> Math A Regents (1 credit)	<input type="checkbox"/> Math A Regents Support (non-credit)	<input type="checkbox"/> Math B Regents Support (non-credit)	<input type="checkbox"/> Math 3 (1 credit)
<input type="checkbox"/> Applied Science (1 credit)	<input type="radio"/> Jan. RCT <input type="radio"/> June RCT	<input type="radio"/> Jan. RCT <input type="radio"/> June RCT	<input type="radio"/> Jan. Regents <input type="radio"/> June Regents	<input type="radio"/> Jan. Regents <input type="radio"/> June Regents	<input type="radio"/> Jan. Regents <input type="radio"/> June Regents	
<input type="checkbox"/> English 11 Regents (1 credit)	<input type="checkbox"/> English 11 Regents Support (non-credit)	<input type="checkbox"/> English 12 (1 credit)	<input type="checkbox"/> English RCT Supp (non-credit)	<input type="checkbox"/> US History Regents (1 credit)	<input type="checkbox"/> US History Support (non-credit)	<input type="checkbox"/> Health (1/2 credit)
<input type="radio"/> Jan. Regents <input type="radio"/> June Regents	<input type="radio"/> Jan. Regents <input type="radio"/> June Regents		<input type="radio"/> RCT Reading <input type="radio"/> RCT Writing <input type="radio"/> Jan RCT <input type="radio"/> June RCT	<input type="radio"/> Jan. Regents <input type="radio"/> Jan RCT	<input type="radio"/> Jan. Regents <input type="radio"/> Jan. RCT <input type="radio"/> June Regents <input type="radio"/> June RCT	<input type="checkbox"/> Physical Education (1/2 credit)
				<input type="checkbox"/> Part. in Govt. (Spring only) (1/2 credit)		

PLEASE NOTE FOR BARRY TECH STUDENTS: Enrollment in credit-bearing academic course results in a reduction of career education hours earned. All SUPPORT classes are NON-credit; enrollment in a support course does NOT result in a reduction of career education hours earned.

TESTING MODIFICATIONS as designated on the current IEP or 504 Accommodation Plan:

None
 1. Extended time
 2. Flexible location
 3. Directions read and explained
 4. Questions read
 5. Access to calculator
 6. Other _____

MEDICAL CONDITIONS/MEDICAL DISABILITIES _____

SPECIAL CIRCUMSTANCES (such as attendance, adjustment difficulties, etc., that will assist the pupil personnel services staff in identifying and delivering specific support services) _____

CIVIL RIGHTS INFORMATION FOR NEW STUDENTS IS REQUIRED FOR COMPLIANCE WITH FEDERAL CIVIL RIGHTS MANDATES.

PLEASE CHECK ONE

Disability Code

<input type="checkbox"/> 00 - Not disabled	<input type="checkbox"/> D - Emotionally Disabled	<input type="checkbox"/> H - Multiply Disabled	<input type="checkbox"/> L - Traumatic Brain Injury
<input type="checkbox"/> A - Autistic	<input type="checkbox"/> E - Hard of Hearing	<input type="checkbox"/> I - Orthopedically Impaired	<input type="checkbox"/> M - Visually Impaired
<input type="checkbox"/> B - Deaf	<input type="checkbox"/> F - Learning Disabled	<input type="checkbox"/> J - Other health Impaired	
<input type="checkbox"/> C - Deaf-Blind	<input type="checkbox"/> G - Mentally Retarded	<input type="checkbox"/> K - Speech Impaired	

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Disadvantaged Code

<input type="checkbox"/> 0 - None	<input type="checkbox"/> 2 - Socioeconomic program	<input type="checkbox"/> 4 - Limited English Speaking	<input type="checkbox"/> 6 - Requires related services
<input type="checkbox"/> 1 - Academic	<input type="checkbox"/> 3 - Cultural	<input type="checkbox"/> 5 - Requires specially designed educational program	

PLEASE CHECK ONE

Racial/Ethnic Classification

10 - American Indian or Alaskan Native: A person having origins in any of the original peoples of the Western Hemisphere.
 20 - Asian (Oriental) or Pacific Islander: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands.
 30 - Black or African American: A person having origins in any of the original peoples of sub-Saharan Africa.
 40 - Caucasian: A person having origins in any of the original peoples of Europe, North Africa, the Middle East, or the Indian subcontinent.
 50 - Hispanic: A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

FOR BARRY TECH

Mail completed application to:
 Central Administration Office
 Nassau BOCES Administrative Center
 71 Clinton Road
 P.O. Box 9195
 Garden City, New York 11530-9195
 516-396-2377 • Fax: 516-333-8135

FOR OTHER SECONDARY PROGRAMS

Mail completed application to:
 Dept. of Instructional Services
 and Alternative Schools
 Nassau BOCES Administrative Center
 71 Clinton Road • P.O. Box 9195
 Garden City, New York 11530-9195
 516-396-2262 • Fax: 516-396-2355

FOR OTHER SECONDARY SCHOOL APPLICATION MATERIALS

Please contact the appropriate school below:
 Cultural Arts Center: (516) 622-5678
 English Language Alternative Program (ELAP): (516) 608-6430
 Positive Alternative Twilight High School (PATHS): (516) 608-6445
 Program of Alternative Comprehensive Education (PACE): (516) 626-1022
 Springboard: (516) 608-6430
 Teenage Parenting Program (TAP): (516) 608-6400

The public is advised that all vocational educational opportunities, services, and other programs offered by the Board of Cooperative Educational Services of Nassau County are made available to all persons without regard to race, color, national origin, sex or handicap. The lack of English skills on the part of any applicant for admission to a Nassau BOCES service will not be a barrier to admission or participation in such opportunities or programs. Information regarding disabilities requested on this application is necessary for the purposes of appropriate student placement and to insure services appropriate to individual needs.

Nassau BOCES E-School Student ID #