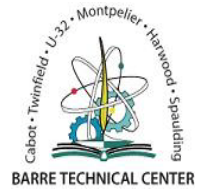




# Barre Technical Center Student Application Information

To be completed by the sending school Guidance Department, student and parent  
BTC Student ID # \_\_\_\_\_

YRGR      SCH      IDENTIFIER



## STUDENT INFORMATION

Date of Application: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age 1st day of program: \_\_\_\_\_  
Last Name: \_\_\_\_\_ Student start date: \_\_\_\_\_  
First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_  
Gender: M F Home Telephone: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
(circle one) Cell Phone: \_\_\_\_\_ (optional)

Your grade level on first day of program: 9 10 11 12 (circle one) ( 13-AWD 15-AWO ) Year of Graduation \_\_\_\_\_

Race/Ethnicity (Optional):  Black  Asian/Pacific Islander  Hispanic  American Indian/Alaskan Native  
 White  Other \_\_\_\_\_

STUDENT'S PHYSICAL ADDRESS (Street, City, Town, ZIP) \_\_\_\_\_

<b>Town of Residence:</b>		<input type="checkbox"/> Barre City	<input type="checkbox"/> Barre Town (Including So. Barre, East Barre, Websterville, Graniteville)	
<input type="checkbox"/> Cabot	<input type="checkbox"/> Calais	<input type="checkbox"/> Duxbury	<input type="checkbox"/> E. Montpelier	<input type="checkbox"/> Fayston
<input type="checkbox"/> Marshfield	<input type="checkbox"/> Middlesex	<input type="checkbox"/> Montpelier	<input type="checkbox"/> Moretown	<input type="checkbox"/> Plainfield
<input type="checkbox"/> Waitsfield	<input type="checkbox"/> Warren	<input type="checkbox"/> Waterbury	<input type="checkbox"/> Other:	
<b>Sending School:</b>				
<input type="checkbox"/> Adult w/diploma	<input type="checkbox"/> Adult w/out diploma	<input type="checkbox"/> Cabot	<input type="checkbox"/> Harwood	
<input type="checkbox"/> Home Schooled	<input type="checkbox"/> Montpelier	<input type="checkbox"/> Spaulding	<input type="checkbox"/> Twinfield	
<input type="checkbox"/> U32	<input type="checkbox"/> Other:			

## Technical Programs Offered

List Preferences by marking a 1 in box of first choice and a 2 in second choice. (Second Choice is Optional)

If RETURNING STUDENT, please check here:

- |  |   |
|--|---|
| <input type="checkbox"/> Automotive Technology           | <input type="checkbox"/> Human Services                         |
| <input type="checkbox"/> Building Trades                 | <input type="checkbox"/> Medical Services                       |
| <input type="checkbox"/> Business and Leadership Studies | <input type="checkbox"/> Plumbing and Heating                   |
| <input type="checkbox"/> Cosmetology I                   |   |
| <input type="checkbox"/> Cosmetology II                  | <input type="checkbox"/> Pre-Tech Exploratory                   |
| <input type="checkbox"/> Culinary Arts - Green Room      |   |
| <input type="checkbox"/> Culinary Arts – Bake Shop       | <input type="checkbox"/> Pre-Tech Outreach Spaulding/Montpelier |
| <input type="checkbox"/> Digital Media Arts              | <input type="checkbox"/> Pre-Tech Outreach Cabot/Twinfield      |
| <input type="checkbox"/> Electrical Technology           | <input type="checkbox"/> Pre-Tech Outreach Harwood              |

The Barre Technical Center does not discriminate on the basis of race, creed, color, national origin, gender, gender identity, age, handicapping condition, or sexual orientation in admission, access, or employment in its programs and activities.

Entered In: \_\_\_\_\_ M/S Access \_\_\_\_\_ Power School \_\_\_\_\_ Count

**BARRE TECHNICAL CENTER**

155 Ayers St., Barre, VT 05641-4300 \* 802-476-6237 \* FAX: 802-476-4045 \* http://barretechnicalcenter.org

**Student Application Information Continued**

**PARENT/GUARDIAN INFORMATION**

**Student lives with: Contact First**

Mailing Address:

Relationship: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email Address

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Contact Second:**

Mailing Address:

Relationship: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email Address

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**STUDENT QUESTIONS**

***DIRECTIONS:** To be completed by student. This is an important part of your application. Please answer questions completely. If you need more space please attach a separate sheet.*

Please explain why you want to enroll in this program?

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

Did your interest in this career arise from a visit to the Tech Center program, a presentation, a relative or friend who works in this career, your own prior experience, or in some other way?

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

List three words that you might use to describe yourself as a student:

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

Please list your favorite interests and activities:

Please explain your current career goal and your post high school academic and career plan below:

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

Some BTC programs have safety risks due to the nature of the equipment and tools used in those programs. We understand that care, caution and appropriate behavior are necessary to ensure a safe environment for oneself and others.

\_\_\_\_\_  
Student Signature Date Parent/Guardian Signature Date

**ADMISSIONS INFORMATION**

Interview Completed Date: \_\_\_\_\_ Teacher: \_\_\_\_\_  Admitted Date: \_\_\_\_\_



# Barre Technical Center

## Educational Information (to be completed by Counselor)

Student's Name \_\_\_\_\_ Grade Upon Entering \_\_\_\_\_  
Last First Middle

Program \_\_\_\_\_

Counselor's Name(s) \_\_\_\_\_ Phone \_\_\_\_\_

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

Please include copies of the following with the application:

1. TRANSCRIPT
2. REPORT CARD
3. ATTENDANCE: Number of days absent to date (current school year): \_\_\_\_\_
4. TEST SCORES
5. DISCIPLINE & BEHAVIOR: Please check ALL that apply:

In or out-of school suspensions within the last year.  
If yes, how many incidents: \_\_\_\_\_ how many days total: \_\_\_\_\_

Other behavioral concerns:  
\_\_\_\_\_

No behavior or discipline issues.

I \_\_\_\_\_ believe that \_\_\_\_\_ can meet  
(Counselor or Case Manager Signature) (Student)

the academic requirements of the program selected and can behave in such a manner as to ensure his/her safety and the safety of others. I verify that we have included the requested records of this student in their entirety.

*Note: Special educators and guidance counselors are encouraged to invite the student services coordinator (802-476-6237 Ext. 1258) to pre-enrollment meetings.*