REGION 10 TECHNICAL HIGH SCHOOL
New Student Application

How to Apply

□ Complete both sides of this application with all appropriate information and signatures (both student & guardian)
□ RETURN TO KELLIE GARDNER VIA THE FOLLOWING METHODS:
  1. Scan or photograph both sides of the application and email to gardner@r10tech.org
  2. Snail mail the application to Kellie Gardner, Region 10 Technical High School, 68 Church Road, Brunswick, ME 04011
□ If neither option is feasible, please call (207) 729-6622

Student Name:_________________________________________ Today's Date:________

Circle the high school you are now attending: BHS FHS HCA LHS MTA Other

Circle your current grade: 9 10 11 12 School Counselor:____________________

REGION 10 TECHNICAL HIGH SCHOOL PROGRAMS

In the space provided, please number your choice from 1-3. Place 1 next to your first choice, 2 next to your second choice, and 3 next to your third choice.

___ Auto Collision Repair
___ Automotive Technology
___ Building Trades
___ Certified Nursing Assistant
___ Creative Digital Media
___ Culinary Arts
___ Early Childhood Education

___ Foundations of Technology   A - construction, automotive tech & collision repair, small engine repair, welding

___ Foundations of Technology   B - CNA, EMT, early childhood education, creative digital media, culinary arts

STUDENT PERSONAL INFORMATION

Full Legal Name:_________________________________________ Date of Birth________ month/day/year

Mailing Address:

_________________________________________

Street Number and Street Name

_________________________________________

Town/City State Zip Code

Home Phone:_________________________ Student Cell:_________________________

Equal Educational Opportunity: Region 10 Technical High School admits students and makes available to them its advantages, privileges and courses of study without regard to homelessness, race, color, sex, religion, national origin, gender identity, sexual orientation or disability
PARENT/GUARDIAN CONTACT INFORMATION

Primary Guardian Name:_____________________________________________________________

Mother ____  Father ____  Other__________________________________

Mailing Address:

__________________________________________________________________________________________________________

Street Number and Street Name

____________________________________________________________________________________________________

Town/City___________State______Zip Code_________

Home Phone:_________________________  Cell Phone:_________________________

Work Phone:_________________________  Email:_________________________

APPLICATION QUESTIONS

1) How did you hear about Region 10:___________________________________________________________

2) If offered the opportunity to attend Region 10 Tech all day, would you be interested in an all day program? _____ YES  _____ NO

3) Please explain in your own words why you are applying for this program. Describe how you see this program helping you achieve your future goals. (attach a separate page if necessary)

_____________________________________________________________________________________________________

_____________________________________________________________________________________________________

4) Daily attendance is important to your success at Region 10 Technical High School. If you miss one day of class you will have missed more than two hours of instruction. If you have attendance issues at your high school where you’ve been absent for more than 10 days, excused or not, please attach a separate page and explain in your own words how you will improve your school attendance if you are accepted into Region 10.

RECORDS RELEASE AUTHORIZATION

We approve this application and hereby give permission for the release of record pertaining to grades, attendance, behavior/discipline and recommendation to Region 10 Technical High School. We shall advise Region 10 Technical High School of any changes in resident before and after enrollment in a timely manner.

______________________________________________  ______________________________  _______
Student Signature  Signature of Parent/Guardian  Date