

**Norfolk County Agricultural High School
400 Main Street
Walpole, MA 02081
508.668.0268 (Ext. 399)
508.668.0612 (Fax)**

ADMISSION APPLICATION FORM

The Norfolk County Agricultural High School does not discriminate on the basis of race, color, sex, sexual orientation, religion, national origin or handicap in its education activities or employment practices as required by Title IX of the 1972 Federal Education Amendments, by Section 504 of the 1973 Rehabilitation Act and by Chapter 622 of the General Laws of the Commonwealth of Massachusetts.

NCAHS has a published admission policy that is made available to all applicants and parent(s)/guardian(s) as part of the admission process. The policy gives the 5 admissions criteria, as well as a description of the entire admission process.

This application form must be completed and submitted to the NCAHS Admission Office. It is recommended that applications be submitted by April 1, but they will continue to be considered until available spaces are filled. In addition to this application form, the applicant's current guidance counselor or designee will be contacted by NCAHS for the applicant's grades, attendance record (including excused and unexcused absences), discipline/conduct record, and a completed Recommendation Form.

For fall admission, this information would cover terms 1 & 2 of the current school year and terms 1 – 4 of the previous school year. A fifth admission requirement consisting of an interview with the applicant will also be used to complete the application process. The interview will be conducted at NCAHS during an Admissions Program. The applicant will be invited to the Admissions Program upon receipt of this application form and/or as space in a program is available.

APPLICANT SECTION

Applicant
Last Name: _____ First: _____ Middle: _____
Current Grade: _____ Grade Applying for: _____ Date of Birth: _____
Home Address: (Number & Street): _____
City/Town of Residence: _____ State: _____ Zip: _____
Home Phone #: _____ Current School: _____
Address: _____
Guidance Counselor's Name: _____
How did you hear about NCAHS: _____

PARENT/GUARDIAN SECTION

Parent/Guardian
Last Name: _____ First: _____ Middle: _____
Home Address:
(Number & Street): _____
City/Town: _____ State: _____ Zip: _____
Home Phone #: _____ Work Phone #: _____
Other Phone # where a parent/guardian can be reached (cell): _____

INTEREST AREA SECTION

Rank your specific interest areas in order of preference: 1 – First Choice, 2 – Second Choice, 3 – Third Choice

____ Equipment Operations	____ Farm Management	____ Environmental Technology
____ Equipment Repair & Service	____ Marine Science & Freshwater Ecology	____ Floral Design
____ Construction & Welding Technology	____ Pet Shop Management	____ Landscape Management
____ Canine Science	____ Small Animal Technology/ Biotechnology	____ Ornamental Gardening
____ Dairy & Livestock Management	____ Veterinary Science	____ Urban Forestry
____ Equine Science	____ Natural Resources	

VOLUNTARY EQUAL EDUCATIONAL OPPORTUNITY INFORMATION SECTION

The information requested in this section is not required for admission. Submission of the information is entirely voluntary. Information submitted voluntarily by the applicant will not affect the applicant's admission to the school. The information, if supplied, is to be used for monitoring equal educational opportunity in the school district, and in the case of disability and English language learner status, for providing the applicant with accommodations and interpretive services if requested. Applicants with disabilities may voluntarily self-identify for the purpose of requesting reasonable accommodations during the entire application and admission process. Applicants who are English language learners may voluntarily self-identify for the purpose of receiving interpretive services during the entire application and admission process.

Gender identification: ____ Female ____ Male

Ethnicity: Please choose one: ____ Not Hispanic or Latino ____ Hispanic or Latino

Race: Please choose all that apply:

____ Asian ____ Black ____ Native Hawaiian or other Pacific Islander

____ American Indian or Alaska Native ____ White

Person with a Disability: ____ Yes If yes, do you need accommodations during the application process?
____ Yes If yes, please describe the accommodations needed. _____

Person who is an English language learner: ____ Yes if yes, do you need language assistance during the application for admission process? ____ Yes if yes, please describe the assistance needed.

Language spoken at home: _____

SIGNATURE SECTION

The statements and information furnished by the undersigned in this application form are true and complete. The undersigned applicant's parent/guardian give permission for representatives of the sending school to release the applicant's records including, grades, attendance, conduct/discipline records, as well as any other pertinent information that may be required by NCAHS for the purpose of admission.

Our signatures certify that we have read and agree with the above statements.

Signature of student: _____ **Date:** _____

Signature of Parent/Guardian: _____ **Date:** _____