



## DEMOGRAPHIC INFORMATION

Please enter a valid race or ethnicity code:  _____	<b>Valid Code Values:</b> Select one and enter in the provided field to the left. <b>1-American India/Alaskan Native</b> (not Hispanic) <b>3-Black or African American</b> (not Hispanic) <b>4-Hispanic</b> (any race) <b>5-White</b> (not Hispanic) <b>6-Multi-Racial</b> (not Hispanic) <b>9-Asian</b> (not Hispanic) <b>10-Native Hawaiian or other Pacific Islander</b> (not Hispanic)
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## EMERGENCY INFORMATION

NAME OF EMERGENCY CONTACT PERSON \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
(other than legal guardian)

ADDRESS \_\_\_\_\_ ( ) \_\_\_\_\_  
TOWN STATE ZIP AREA CODE PHONE NUMBER

IS THE EMERGENCY PERSON PERMITTED TO TRANSPORT STUDENT? YES NO

NAME OF EMERGENCY CONTACT PERSON \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
(other than legal guardian)

ADDRESS \_\_\_\_\_ ( ) \_\_\_\_\_  
TOWN STATE ZIP AREA CODE PHONE NUMBER

IS THE EMERGENCY PERSON PERMITTED TO TRANSPORT STUDENT? YES NO

DOCTOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ( ) \_\_\_\_\_  
TOWN STATE ZIP AREA CODE PHONE NUMBER

### NOTE:

**A student, after applying and being accepted at Jeff Tech, must provide written notification signed by parents or guardians, to the high school by August 1, that he/she has changed the decision to attend Jeff Tech. Failure to follow this procedure may result in the student being required to attend Jeff Tech until the end of the first semester (2<sup>nd</sup> nine-week period) before withdrawal is accepted.** A waiver may be granted in extenuating circumstances as determined by the administration. Jeff Tech acceptance is contingent upon satisfactory completion of 8<sup>th</sup> grade and submission of a complete application.

The information given above represents my request for admittance to Jeff Tech. I understand all effort will be made to consider me. I will be counseled further if necessary. *By signing this application, I acknowledge the responsibility to make myself aware of and agree to abide by the rules and regulations of Jeff Tech* which, by nature of its training, emphasizes safety to equipment and personnel.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT'S APPROVAL SIGNATURE