



Morris County School of Technology

400 East Main Street (Rt.53) ~ Denville, NJ 07834

Tel: 973-627-4600 ~ Fax: 973-627-4738

Website: www.mcvts.org

For Office Use Only: Application Code
 Date: ___/___/___ New ___ Returning ___
 Program: _____
 Session: AM ___ PM ___
 Grades: Math ___ Science ___ CL ___

SHARE-TIME APPLICATION: 2010-2011 (Deadline: 3/5/10)

PLEASE COMPLETE THIS FORM IN INK

Student Information

Last Name First M.I.

High School Current Grade

Home Address

Resident District

City State Zip

Ethnic Background:

- Asian Black Native American
 Hispanic White Other _____

(Ethnic information is required by the U.S. Department of Health Education and Welfare Office for Civil Rights Compliance)

Home Telephone Cell Phone No.

Native Language:

Date of Birth ___/___/___ Male ___ Female ___

Limited English: Yes ___ No ___

Mother/Guardian Information

Father/Guardian Information

Last Name First M.I.

Last Name First M.I.

Place of Work Occupation

Place of Work Occupation

Weekday Telephone No. Cell Phone No.

Weekday Telephone No. Cell Phone No.

E-mail address

E-mail address

Applicant Resides With: Both parents Father Only Mother Only Other _____

EMERGENCY CONTACT PERSON:

Last Name First M.I. Relationship Weekday Phone No. Cell Phone No.

PROGRAM SELECTIONS: Please select choice (s) using the numbers 1, 2 or 3

- ___ Auto Body/Collision Repair ___ Carpentry ___ Cosmetology I ___ Plumbing
 ___ Auto Service Tech I ___ Computer Drafting & Graphics Studio ___ Electrical ___ Welding

Programs for Students with Special Needs

- ___ Auto Body ___ Automotive Service Technology ___ Building and Grounds Maintenance
 ___ Building Construction ___ Food Services ___ Retail Supermarkets

RELEASE INFORMATION

I hereby authorize my school or sponsoring agency to make available all required scholastic, attendance, discipline, health, and/or Section 504 plans or Child Study Team evaluations (if applicable) to the Morris County School Vocational School District.

Applicant's Signature Date ___/___/___

Parent/Guardian's Signature Date ___/___/___

SAFETY AGREEMENT

Appropriate instruction in the proper use of tools and equipment used in the program is provided and close supervision is maintained. It is mandatory that all students accept the obligation to obey the safety rules designed to protect them and others.

We read and agree to support the safety agreement as written above.

Applicant's Signature Date ___/___/___

Parent/Guardian's Signature Date ___/___/___

