

APPLICATION FOR ADMISSION

**AGRICULTURAL EDUCATION/NORTHWESTERN
REGIONAL**

100 Battistoni Drive, Winsted, CT 06098
Voice: (860) 379-9013 Fax: (860) 738-0646
E-Mail: mhaaland@nwr7.org

IMPORTANT INSTRUCTIONS

1. Complete pages 1 through 3 of this application with the appropriate signatures along with 3 letters of recommendation (non-related) and **return them to your Guidance Counselor**. Your counselor will complete the application and forward it, along with your transcripts, Mastery Test scores and to the Agricultural Education Center. **Application, records and letters must be submitted by January 4th to the Ag Ed Office.**
2. All applicants and parents/guardians must attend an orientation meeting with the Agricultural Education Staff, upon acceptance into the Program.
3. Notification of acceptance will be forwarded to students and their Superintendents. (Students must contact their Superintendent for transportation.)
4. *Accepted* students should contact **Northwestern Regional's Guidance Department (379-8525)** for course scheduling, as well as the **Registrar's Office (ext. 2506)** to register with Northwestern.

PERSONAL INFORMATION

NAME: _____
(Last) (First) (MI)

BIRTHDATE: _____ **GRADE:** _____ Male Female

HOME ADDRESS: _____
(Number & Street)

(City/Town) (State) (Zip Code)

PHONE: _____ **E-MAIL:** _____

WITH WHOM DO YOU LIVE?

____ Mother and Father ____ Mother and Stepfather
____ Father and Stepmother ____ Mother ____ Father
____ Other (please describe below)

(Last Name) (First Name) (Relationship)

FATHER'S NAME: _____
(GUARDIAN) (Last) (First) (MI)

HOME ADDRESS: _____
(if different) (Number & Street)

(City/Town) (State) (Zip Code)

PHONE: _____ **E-MAIL:** _____

EMPLOYER: _____ **PHONE:** _____

MOTHER'S NAME: _____
(GUARDIAN) (Last) (First) (MI)

HOME ADDRESS: _____
(if different) (Number & Street)

(City/Town) (State) (Zip Code)

PHONE: _____ **E-MAIL:** _____

EMPLOYER: _____ **PHONE:** _____

APPLICANT AGREEMENT:

I understand, if I am accepted, I will attend Northwestern Regional School to study Agricultural Education. I understand that while I am a student at Northwestern, I will obey and fulfill all rules and requirements of the School and the Agricultural Education Department. If for some reason I do not choose to obey the conditions above, I will no longer be allowed to continue as a student in the Agricultural Education Program. I also understand, if I do not live in Regional School District #7, I must return to my own town for the remainder of my secondary education.

(Applicant's signature)

(Date)

AGRICULTURAL INTEREST/EXPERIENCE

Please describe your interests in agriculture, any experiences you have related to agriculture, and any membership in community, leadership, or agricultural organizations.

Why do you want to participate in the Agricultural Education Program/FFA?

PARENT AGREEMENT AND RELEASE OF RECORDS

I approve this application and agree to encourage punctuality and regular attendance. I understand that part of the Agricultural Education Program is a supervised agricultural experience/leadership program, and I agree to support the

student in this phase of work. I hereby request the _____
(name of school)

School Guidance Department to release the records of _____
(name of applicant)

to the Agricultural Education Department at Northwestern Regional School.
(Records to include transcripts of courses, grades received, credits earned, standardized test scores, Individual Education Plan records, copy of health records, individual educational and psychological tests, attendance, teacher comments and counselor recommendations.)

(Signature)

(Date)

TEACHER/TEAM INPUT

Please respond to the following questions about this applicant who is applying for admission to the Northwestern Regional Agricultural Education Program.

Do you feel this student is well motivated in his/her desires to attend the Agricultural Education Program? Why or why not?

Do you feel this student would be successful in the Agricultural Education Program?

Why or why not? _____

What do you feel are this student's greatest strengths and weaknesses? _____

Is the student achieving to his/her ability? Please explain: _____

Please rate the following attributes using a scale of **1 being superior and 5 being unsatisfactory.**

Quality of work	_____	Maturity	_____
Effort	_____	Cooperation	_____
Behavior	_____	Attitude towards teachers	_____
Responsibility	_____	Attitude towards students	_____

How many hours per week of special services is this student receiving? _____

Individual or team completing this form

School

Date