

CAPE MAY COUNTY TECHNICAL SCHOOL DISTRICT

188 Crest Haven Road

Cape May Court House, NJ 08210

ADULT HIGH SCHOOL

“Senior Standing” Application/Contract Form

(This form must be received by the Technical School District Superintendent by October 15 of the current school year)

Student Name _____
Last First Middle Initial

Address _____
Street City State Zip

Age _____ Date of Birth _____

Parent/Guardian _____
Name Address Phone

Anticipated year of graduation _____

Number of credits required from the Cape May County Technical School District’s Adult High School for graduation _____ (Note: 10 credits maximum)

Title of course(s) requested for this student and number of credits (Note: 2 – five credit courses maximum)

Note: Does this student have a current IEP? Yes No (please check one)

IEP information requested when applicable

Reason for requesting to take this course through the Technical School District’s Adult High School Division:

Student-Parent Guardian Agreement:

1. As part of the enrollment process, the student will meet with the Cape May County Technical School District’s Adult High School Supervisor upon entering to review the school’s procedures and address any questions which the student may have regarding the program.
2. We are aware that the Technical School District has instituted a \$25.00 registration fee for senior standing students, payable at the senior standing student orientation meeting, scheduled for Monday, November 10th at 6:30pm in the district’s Tozour Building.
3. The student-parent/guardian is responsible for transportation to and from the Cape May County Technical School District’s Adult High School facility.
4. The student will be expected to adhere to all discipline standards, attendance requirements and other administrative regulations of the Cape May County Technical School District’s Adult High School while enrolled.
5. Any Senior Standing student withdrawn for non-compliance with attendance requirements or other administrative regulations will not be enrolled during the current school year.
6. Evidence of successful course completion for a senior standing student will be the same as expected for all other Cape May County Technical School District’s Adult High School students.
7. The credit verification forms signed by the teacher of completed course must be submitted to the Cape May County Technical School District’s Adult High School Supervisor by the last night of Adult Evening High School in May, as per the program calendar.

Student Signature

Date

Parent/Guardian Signature

Date

As the Guidance Counselor and Building Administrator for the senior student identified on this form (in need of credits to graduate this school year), we are recommending "Senior Standing" course enrollment in the Technical School's Adult Evening High School program, to the Superintendent.

Name of Sending School District _____

Guidance Counselor (Sending District) _____
Please Print Name Date

Guidance Counselor's Signature _____

Principal's Signature (Sending District) _____
Date

As the Superintendent of this school district, I am requesting that this student be accepted by the Cape May County Technical School District into the Adult Evening High School program as a Senior Standing Student.

Superintendent Signature (Sending District) _____
Date

As the Superintendent of the Cape May County Technical School District, I approve the enrollment of the above-mention student as a Senior Standing student in our district's Adult Evening High School program.

Superintendent, Technical School District _____
Date

Supervisor, Technical School District's Adult High School _____
Date

For Office Use Only

Registration Fee \$ 25.00

Fee Paid **check#** _____ **cash** _____ **Credit/Debit** _____

Staff Signature _____ **Date** _____