

Innovation Pathways Application

Application Lottery Date 3/26/21

DIRECTIONS FOR STUDENTS:

Complete all information requested on this page. You and your parent/guardian must sign in the proper place on this page. Return the application to your school's guidance office. Ask a core academic teacher to complete the recommendation on page 3 and return it to the guidance office. A copy of the full admissions policy can be picked up at the main office at 1 Skyline Drive or emailed if you contact: weymouthdg@worcesterschools.net

NAME	·	_ TODAY'S DATE
ADDR	ESS	_ DATE OF BIRTH
	(No.) (Street)	
CITY/TOWN/ZIP		_ TEL
STUDE	ENT ID#:	
PRESE	NT SCHOOL ATTENDING	PRESENT GRADE
PAREN	NTS/GUARDIAN	
	Name	Address (if different)
	DNAL STATEMENT state your reason for applying to the program in 2-3 sentences.	
PROG	RAM SELECTION — Choose ONE program area of greatest	interest and if you have a second choice you may indicate that
	Advanced Manufacturing – Computer design and product de	
	o Certifications possible – NC3, NIMS, MACWIC, O	
Ш	Allied Health/Nursing – Basic patient care, exploration of he • Certifications possible - Certified Nursing Assistant	
		ng a business and finance and marketing techniques to be successful
	Civil Engineering/Construction – Blueprints, building design • Certifications possible – pre-apprenticeship into a la	, material exploration, woodworking
	Information Technology – Hardware/network setup of compu	uters and systems, helpdesk skills, intro to career fields in IT support.
	 Certifications possible – CompTIA A+, CompTIA N IT Computer Science – Programming skills and solutions, we 	ebsite design and programming
	 Certifications possible – OSHA, other related certifications possible – OSHA, other related certifications possible – OSHA 	
	/Guardian Application Authorization:	
Ιo	nnuovo this application and undoustand if assented into an	Innovation Dethysaya Ducanom students will.

I approve this application and understand if accepted into an Innovation Pathways Program, students will:

- Have 15-week technical classes, two days a week, over two years at Worcester Tech until 5:30
- Have Career and Academic Planning classes over two years as part of their regular high school schedule
- Have an internship or capstone project requirement prior to graduation
- Have 2 AP or dual enrollment classes as a requirement prior to graduation

INNOVATION PATHWAYS CRITERIA FOR ADMISSION

1. All applicants must be on track to successfully complete their present grade	le	vel and be pr	omoted to the grade	level for which they	
are applying. Preference will be given to current 9 th grade students.					
2. Students must pass the following application criteria:					
	D.	Safety Rev	iew		
_ ,	Е.	Interview			
C. School Attendance	F.	Teacher Re	commendation		
Name	Grade				
Student ID:					
TO BE COMPLETED BY THE GUIDANCE COUN					
Counselors should collect completed applications and forward to Drew Weyn	ou	th at Worces	ter Technical High	School via interoffice	
mail.					
Date complete application was received by counselor:					
<u>Criteria for application</u>			Satisfactory	Does not meet criteria	
Personal Statement – Student must provide 2-3 sentences.					
Academic Eligibility – Student must have a grade of 65 or higher in four ye courses by the end of semester 1 in year of application.	arlo	ong major			
<u>School Attendance</u> - Student must have 9 or less unexcused absences as of t semester 1 in year of application.	he	end of			
Safety Review – Student must not have a discipline record indicating safety during their high school years. Safety concerns may include, violence, sexual drug, or weapon related incidents during high school years.					
for the program.					
I certify this information to be complete and accurate.					
Guidance Counselor			Date		
	D	EXTERNA			
TO BE COMPLETED BY THE IPP APLICATION <u>Criteria</u>	K	EVIEW			
Application – Student application submitted on time.			Yes	<u>No</u> □	
Interview – Student was able to articulate interest in the program and reason	fo	or applying			
during the interview.					
<u>Admission</u> – Student application is complete and meets all qualifications for eligibility.	en	rollment			
I certify this information to be complete and accurate.					
Innovation Pathways Personnel		Date			

INNOVATION PATHWAYS TEACHER RECOMMENDATION

Name Gra	de	
Student ID:		
Successful Innovation Pathway candidates will show a high level of follow-which they commit. Their attendance is a significant factor in program successive providing ratings and comments. Please return this form directly to	ess. Please keep these	items in mind
student as it is confidential information.		
Summarize below, the ratings to be made by teacher. Please return to the school guid office.	lance Satisfactory	Have reservations
A. Classroom Involvement		
B. Conduct/Behavior/Citizenship		
C. Motivation		
D. Personal Responsibility		
I certify this information to be complete and accurate.		
Core Academic Teacher	Date	