



JOSEPH P. KEEFE TECHNICAL SCHOOL

750 Winter Street • Framingham, MA 01702 • 508-416-2270 • Fax 508-416-2234

ADRIENNE BOGUSKY

Director of Guidance and Admissions

abogusky@jpkeefehs.org

February 2015

Dear 8th Grade Parent/Guardian:

Enclosed is an application for a program we are offering this March to eighth grade students who have applied to Keefe Regional Technical High School. We are excited about inviting potential freshmen students to experience some of our Career and Technical Programs, as well as a variety of fun after-school activities with faculty at Keefe Tech. Our goal is for incoming freshmen to feel comfortable with their transition to high school and be excited about their choice to apply to Keefe Tech.

Please see the enclosed flyer for career-tech options*, dates, and times the program is running. We encourage your son or daughter to sign up! This is a great way for applicants to meet new friends and prepare for success in high school.

The deadline to RSVP for the program is Friday, March 6, 2015. Please return the enclosed application in the prepaid envelope provided by the date above to reserve a spot for your son or daughter.

We may be contacting you about the program in the near future by phone, but please do not hesitate to call if you have questions before then. Our contact information is enclosed and we look forward to a great experience in March for your student!

Sincerely,

A handwritten signature in black ink, appearing to read "Adrienne Bogusky", written over a light blue horizontal line.

Adrienne Bogusky
Director of Guidance and Admissions
Keefe Regional Technical School

Enclosures

** Program selection for March Madness does not affect career and technical placement that student plans to pursue when he/she is a freshman at Keefe Tech.*

MARCH MADNESS 2015

KEEFE TECHNICAL HIGH SCHOOL

DATES: MARCH 10, 11, 12

Student Name: _____ Birth Date: __ / __ / __
Address: _____ Town: _____ Zip: _____
Home Phone: (____) _____ Parent / Guardian: _____
Emergency Phone: (____) _____ Contact Name: _____
Cell Phone: _____ Middle School: _____
Student Email: _____ Parent Email: _____

Please place a 1 & 2 next to the careers that most interest you.
Assignments will be made based on availability.

Graphic Arts _____ **Culinary Arts** _____ **Woodworking** _____
Electrical _____ **Metals** _____ **Pastry Making** _____

Transportation will be provided to Keefe Tech immediately after school.
Student pick-up will be required at Keefe (end of building closest to Loring Arena)
at 5:30 PM

Parent / Guardian Permission for all activities

I here by give me child permission to participate in all activities at Keefe Tech. I understand and accept that Keefe Technical School will not be held liable for accidents of medical or dental expenses incurred as a result of the program. In the event of injury or illness, the school has my permission to provide medical care. I intend this statement to take effect as a sealed instrument.

Parent / Guardian Signature: _____ Date: __ / __ / __

*** COMPLETE MEDICAL CHECKLIST ON BACK ***

*** MEDICAL CHECKLIST ***

THE FOLLOWING INFORMATION MUST BE COMPLETED AND SUBMITTED

So that we may best provide individual attention for students, please indicate if your child has any of following.

Allergies: Yes () No () To what? _____ Medication: _____

Asthma: Yes () No () Medication: _____

Seizures: Yes () No () Medication: _____

Diabetes: Yes () No () Medication: _____

Any other illnesses, injuries or health concerns: _____

Any daily medications: _____

SAVE THE DATES!

Keefe Technical High School **MARCH MADNESS 2015**

Tuesday, Wednesday, and Thursday Afternoon
March 10, 11 and 12

Transportation will be provided from each middle school to Keefe Tech immediately after school. This is coordinated with the middle school guidance departments for specific pick-up locations.

Student pick-up will be required at Keefe Tech (end of the building closest to Loring Arena) at 5:30 pm
750 Winter Street, Framingham, MA

Return your permission slip in the enclosed prepaid to Keefe Tech.
Registration forms need to be received by Friday, March 6.

Contact program coordinators, Chris Kane at 508.416.2377 – ckane@jpkeefehs.org or Adrienne Bogusky at 508.416.2276 – abogusky@jpkeefehs.org with any questions.

Keep this form as a reminder of times and days!