## Community Living Skills Program 2018-2019 School Year Enrollment Application

Student Name	Home Phone	
Address		
Guardian #1 Work Phone Guardian #2 Work Phone		
Mobile Phone Number	Mobile Phone Number	
District of Residence/Placement	/	

The 2018-2019 Schedule					
Quarter	#	Start *	Finish*		
Quarter	1	8/14/18	10/19/18		
Quarter	2	10/23/18	12/20/18		
Quarter	3	1/07/19	3/08/19		
Quarter	4	3/12/19	5/29/19		

**Directions:** Each CEVEC consortium school has a specific number of slots for the Community Living Skills Program. **Students wishing to apply should consult with their sending district about the number of slots available, and the preferred Quarter(s).** We will try to make every effort possible to accommodate the request.

Students applying for 2 quarters should apply for the first two quarters (1 & 2) or the last two quarters (3 & 4). Students applying for one quarter should apply for quarter 2 or quarter 4. Please specify whether you are requesting the morning session, or the afternoon session.

\*Due to possible differences between the CEVEC calendar and Non-Mayfield school district calendars, actual start and finish dates may differ slightly.

Students who also attend the CEVEC vocational program should request enrollment for the session that they are not at CEVEC. For example, students who attend a CEVEC vocational class in the morning, should request enrollment in the Community Living Skills Program for the afternoon session.

<u>Program Request</u> (Should be filled out with the sending district personnel)

-Does the applicant attend the CEVEC vocational program?		YES (ci	rcle one)	NO
-If the applicant attends CEVEC, which session does the applicant attend?		AM (ci	F rcle one)	ΥM
-How many quarters is the applicant requesting?	1		3 rcle one)	4
-What quarter(s) are you applying for?	1	2 (circle a	3 ll that appl	4 y)
School Contact's Signature				
Parent/Guardian Signature(s)				

Student Signature