Specialized High Schools Registration Survey

•						
Student Name:		_	Class/Grade:			
 Complete this survey to register for a The Specialized High Schools Adm Audition(s) for the Fiorello H. LaG 	nissions Test (SHS	AT)	sic & Art and Performi	ng Arts (l	_aGuardia High :	School)
To pre-register for Audition programs tha	t require pre-regi	istration	talk to your school co	unselor.		
2. Complete, sign, and return this form t	:o				by	
	Accom	modati	ons			
Do you have an IEP or approved 504 Plan?				☐ Yes		
Do you require accommodations for English Language Lear			L)?	☐ Yes	☐ No	
By checking this box, I agree to al approved 504 Plan, or related ELL	•		•		my child's IEP, c	or
Religious observance (check one): ☐ Cannot test☐ None — Can				☐ Cannot test Sunday		
house during the fall. Attending these ope to learn more about the schools. Visit sch YES, I want to take the Specialized High With your parent or guardian, indicate up each school name, write a number (from your preferences on the test ticket.	ools.nyc.gov/shs gh Schools Admis to 8 preliminary	for oper sions Tes school o	house dates. It and will require a test thoices below. In the sp	st ticket. paces pro	vided to the lef	ft of
Choice School Name		Choice	School Name			
l l	The Bronx High School of Science		High School of American Studies at Lehman College			
The Brooklyn Latin School			Queens High School for the Sciences at York College			
Brooklyn Technical High School			Staten Island Technical High School			
HS for Math. Sci. and Eng. at Ci	HS for Math. Sci. and Eng. at City College		Stuyvesant High School			
☐ NO, I do <u>not</u> want to take the Speciali	zed High Schools	Admissi	ons Test and will <u>not</u> re	equire a t	est ticket.	
Students who wish to audition for LaGuardia a YES, I want to register for LaGuardia a	dia High School radiuditions and will	nust regi require	an audition ticket. Che	tudio. ck up to	six studios belo	w.
LaGuardia High School Studio	_		uardia High School Stu	aios	_	
Dance Drama		Instrumental Music Technical Theater				
Fine Art		Vocal Music				
□ NO, I do <u>not</u> want to register for LaGu		L		an audit		
	Sigr	natures				
Student Name/Signature		Date	Date			
Parent/Guardian Name/Signature		- —— Parei	Parent/Guardian Contact Number			