



HFM PTECH 2025-26 Application for Admission

The Hamilton-Fulton-Montgomery Pathways in Technology Early College High School (HFM PTECH), welcomes your application to the 2025-26 ninth-grade class. We are committed to enrolling a diverse student population reflective of the geographic area served by HFM BOCES.

REQUIREMENTS:

Students must:

- Currently be enrolled in school and pass the eighth grade.
- Meet with their school counselor to discuss the program and their application.
- Attend Prospective Student Night.
- Complete the all the requirements of the application no later than March 31.
 This completed application can be submitted by emailing PTECHadmissions@hfmboces.org.

Parents must:

Complete the parent recommendation form.

How applications are assessed for acceptance:

All applications are reviewed by the Application Review Committee and scored on a rubric that considers your personal statement, recommendations, interview, academics, demographic information, discipline history and your interview.

Please indicate your area of interest: (You will be able to change this later if desired)	☐ Health & Medical ☐ Computer Science
	Business
	Advanced ManufacturingAgriculture

STUDENT INFORMATION

Home School	l District:			
			le Initial: Last Name:	
Gender:	Male	Female	Non-Binary	
Date of Birth	:		Current Grade:	
STUDENT C	ONTACT INFO	RMATION		
Street Addre	ess:			
Mailing Addr	ess:			
	n street address)			
City:			State:Zip:	
Country:				
Email Addres	se.			
		ool addresses may blo		
PARENT/GU	ARDIAN INFO	RMATION		
First Name:_		Middle Initial: Last Name:		
Phone Numb	er:			
Email Addres	s:			
ADDITIONA	L INFORMATIO)NI		
	t all school acti		Band	
which you pa		vities in	Chorus	
			Sports	
			Student Government	
			Other	

ADDITIONAL INFORMATION CONT. Please list activities you participate in outside of school: Were you bullied or harassed in your home school? What careers/occupations are you interested in? In a few paragraphs, please tell us what makes you a good candidate for the PTECH program. You may talk about life and education experiences and share anything you feel will help us as we review your application:

What is your ethnicity/race?_____ Is your primary language English?_____ What is your mother's highest level of education?_____ What is your father's highest level of education?_____ Does you have a 504 plan?_____ Do you have an IEP?_____ What is the marital status of your parents?_____ Does your household qualify for free or reduced lunch in your school district? **RECOMMENDATIONS** You must have recommendation forms filled out by a School Counselor, Teacher and Parent/Guardian. Please provide the name and email of each person who will be providing a recommendation on your behalf. School Counselor Name: School Counselor Email Address:_____ Teacher Name: Teacher Email Address: Parent/Guardian Name: Parent/Guardian Email Address: **SIGNATURE** Student Signature:

DEMOGRAPHIC INFORMATION