



**ADMISSION APPLICATION
EARLY CHILDHOOD**

APPLICANT INFORMATION

Name: _____
First Middle Last Preferred Name/Nickname

Home Address: _____
Street City
State Zip Phone: _____

Male Age: _____ Date of Birth: _____ Place of Birth: _____
 Female (Mo/Day/Yr)
Proposed Entrance: _____ Current Grade: _____ Applying for: _____
(month/year)

FAMILY INFORMATION

Parent/Guardian 1: _____ Relationship to Child: _____
Home address: _____
(If different from applicant)

Occupation: _____
Employer: _____
Work Address: _____
Email: _____ Cell phone: _____
Home Phone: _____ Business phone: _____
Community Activities (Volunteer, Board, Service, etc.): _____

Parent/Guardian 2: _____ Relationship to Child: _____
Home address: _____
(If different from applicant)

Occupation: _____
Employer: _____
Work Address: _____
Email: _____ Cell phone: _____
Home Phone: _____ Business phone: _____
Community Activities (Volunteer, Board, Service, etc.): _____

EDUCATION

Does your child have previous group experience? Yes No

Current School Name: _____ Independent/Private Waldorf
 Public

Dates of Attendance: _____

Address: _____

School Phone: _____ Teacher's name: _____

Other schools attended in the past three years:

Name	City	State	Dates of Attendance

GENERAL INFORMATION

Applicant lives with:	<input type="checkbox"/> Parent/Guardian 1	<input type="checkbox"/> Parent/Guardian 2	<input type="checkbox"/> Both	<input type="checkbox"/> Other
Where should materials be mailed:	<input type="checkbox"/> Parent/Guardian 1	<input type="checkbox"/> Parent/Guardian 2	<input type="checkbox"/> Both	<input type="checkbox"/> Other
Check all that apply:	<input type="checkbox"/> Parents Separated	<input type="checkbox"/> Parents Divorced	<input type="checkbox"/> Parent 1 Deceased	<input type="checkbox"/> Parent 2 Deceased

First language, other than English _____ Language(s) spoken at home: _____

If two households, mailings should be sent to Parent 1: _____ Parent 2: _____ Both: _____

Please list names of Applicant's brothers and sisters, their ages, schools now attending and their grade/year in school:

Name	Age	School	Grade/Year

Please list names of relatives who have attended CAWS:

Name	Year Graduated	Relationship

PARENT QUESTIONNAIRE

How did you first learn about CAWS?:

Are you acquainted with members (current or former) in the school community? If so, whom?

Please explain why you are interested in Cape Ann Waldorf School. Mention any books you've read or events you've attended.

What would you like to see your child receive from his/her school experience?

Please describe your child in terms of his or her interests, temperament, strong likes, dislikes, favorite activities, toys, etc.

Please describe your family routines (how your child spends a typical day from waking until bedtime).

PARENT QUESTIONNAIRE - CONTINUED

Has your child been weaned? _____ Has your child been toilet trained? _____

Please describe your child's activities and experience outside the home (babysitter, play group, playmates, grandparents, etc.). _____

How often does your child watch TV/videos, use the computer or other forms of screen media?

Please describe your child's developmental milestones (such as crawling, standing, walking, talking, loss of teeth).

Are any medications given to the child regularly: Yes No

If yes, please describe which medications(s) and for which conditions(s).

Has your child ever had educational or psychological testing and/or early intervention? _____

If so, please provide records with application along with school records release form on our web site.

Does your child have any physical, emotional, or academic issues that her/his teachers should be aware of? Please include allergies, learning issues, speech problems, developmental delays, etc. List any previous and current therapies.

Do you intend to apply for Tuition Assistance? Yes No
(Available for 5-day Kindergarten and Grades school)

Cape Ann Waldorf School does not discriminate against children or their families on the basis of race, color, gender, sexual orientation, marital status, religion, national or ethnic origin, or financial status in its admissions.

A non-refundable application fee of \$50 must accompany this form. Please enclose a check or money order payable to Cape Ann Waldorf School. A separate application for each child is needed.

Signature of parent or guardian

Date

Revised 11/10/11