

## Application for Admissions Grades 1-12

### Applicant Information

Full Name	Preferred Nickname
Mailing Address	Present Grade
City                                      State                                      Zip	Applying for Grade
Telephone	Applying for Year
Date of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female

Has this student applied to Kimberton Waldorf School before?  Yes  No For what year? \_\_\_\_\_ Which grade? \_\_\_\_\_

### Parent/Guardian Information

Parent/Guardian I <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Parent/Guardian II <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.
<input type="checkbox"/> Sole legal custody of student. <input type="checkbox"/> Joint legal custody of student.	<input type="checkbox"/> Sole legal custody of student. <input type="checkbox"/> Joint legal custody of student.
Address (If different from above)	Address (If different from above)
City                                      State                                      Zip	City                                      State                                      Zip
Home Phone	Home Phone
Occupation or Position	Occupation or Position
Place of Employment	Place of Employment
Work Phone	Work Phone
Cell Phone	Cell Phone
Email Address	Email Address

The Admissions Office should use which phone during the Admissions Process?  Parent I  Parent II  Both  Other \_\_\_\_\_

To whom should Admissions Office correspondence be sent?  Parent I  Parent II  Both  Other \_\_\_\_\_

### Family Information

Applicant's Sibling(s):	Birth Date	Grade Level	School Attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe the applicant's relationship with his/her siblings: \_\_\_\_\_  
 \_\_\_\_\_

Check one:  Parents living together    Parents divorced/separated    Single parent    Other

Parent/Guardian I is remarried

Parent/Guardian II is remarried

Stepparent's Name (if applicable) Dr. Mr. Mrs. Ms.

Stepparent's Name (if applicable) Dr. Mr. Mrs. Ms

Address

Address

City State Zip

City State Zip

Occupation or Position

Occupation or Position

Place of Employment

Place of Employment

Work Telephone

Work Telephone

Cell Phone

Cell Phone

Email Address

Email Address

### Kimberton Waldorf School Relatives (optional)

Did (do) any relatives of this student attend KWS?   Relationship to Student   Year Graduated/Current Grade

_____	_____	_____
_____	_____	_____

### Background Information (optional)

(Note: Answering these questions is optional. They are asked so that Kimberton Waldorf School can respond to requests for summary applicant data from the National Association of Independent Schools, from independent school guidebooks, and from other organizations. We are dedicated to fostering an educational environment broadly representative of those around us.)

Please identify student's racial/ethnic group.

- African American     Caucasian     Middle Eastern     Native American
- Asian American     Hispanic American     Multiracial (specify)     Other specify \_\_\_\_\_

Student's country of birth and/or citizenship \_\_\_\_\_ How long has applicant lived in the U.S.? \_\_\_\_\_  
(If student not born in the U.S.)

### Current School Information

This student is a resident of which Pennsylvania school district? \_\_\_\_\_

Name of Present School (and School District if different than above)	Grades Attended
Address	<input type="checkbox"/> Director <input type="checkbox"/> Principal <input type="checkbox"/> Counselor
City State Zip	Telephone                      Fax
Other Schools Previously Attended	Grades Attended

### Educational Information

Foreign Languages Studied: \_\_\_\_\_ How many years? \_\_\_\_\_

Music Training/Instrument: \_\_\_\_\_ How many years? \_\_\_\_\_

Subjects enjoyed most/least: \_\_\_\_\_

Academic Strengths: \_\_\_\_\_

\_\_\_\_\_

Academic Challenges: \_\_\_\_\_

\_\_\_\_\_

Describe any academic support or accomodations received and/or needed: \_\_\_\_\_

\_\_\_\_\_

### Descriptive Information

Why are you seeking a Waldorf Education for your child?

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Describe your family’s relationship to media (television, computers, videos, video games, etc.)

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Does your child have any particular hobbies, special interests, or out of school activities?

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What do you feel are your child's areas of strength, and what areas you would like to help your child develop further?

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Is there any additional information you would like to share with regard to any academic, physical, medical or other issues/needs that your child has?

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**By signing this application, we affirm that we have provided all pertinent information and that all information provided is accurate, to the best of our knowledge:**

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**Parent Signature**

**Date**

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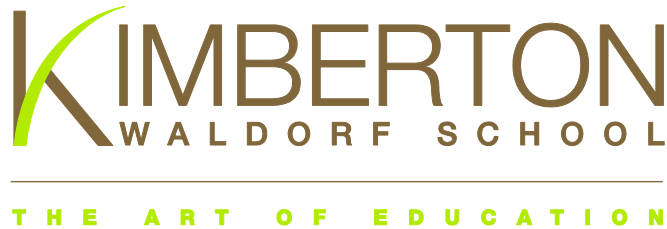
**Parent Signature**

**Date**

**A nonrefundable fee of \$75 must accompany this application.** The application will not be processed without the fee. Final acceptance is based upon a personal interview with child, observation, and the availability of space in the class.

Kimberton Waldorf School does not discriminate on the basis of race, religion, gender, ethnic background, or national origin in admission of students, in financial aid grants, or in any program offered.





**REQUEST FOR RECORDS**

Please give this request to the Registrar of your present school.

**Applicant's name** \_\_\_\_\_

**School** \_\_\_\_\_

**Date Student Enrolled** \_\_\_\_\_

To the Registrar: This student is applying to Kimberton Waldorf School. Please send us the following records (if applicable):

- Academic Records (subjects and grades) for the past three years
- Health and Dental Records
- Standardized Testing Results
- Screening/Placement Records for Academically Talented Programs and Special Education Programs
- Psychological Testing and Evaluation
- Individual Educational Plans, Service Agreements, or Accommodations
- Records of Disciplinary Actions
- Attendance Records
- Other Pertinent Documents

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I hereby give my permission to \_\_\_\_\_

School to release the records of \_\_\_\_\_ to Kimberton Waldorf School.

Signature of Parent/Guardian

\_\_\_\_\_ Date

***Please send records to:***  
**Admissions Office, Kimberton Waldorf School**  
**PO Box 350, Kimberton, PA 19442**





*CONFIDENTIAL*

Name of Student \_\_\_\_\_ Current Grade \_\_\_\_\_  
 School \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Your name (print) \_\_\_\_\_ Position \_\_\_\_\_  
 How long have you known this applicant? \_\_\_\_\_ (Years / months)

<b><i>Compared to other students whom you have taught, please check (✓) how you would rate this student:</i></b>	<b>Exceeds Expectations</b>	<b>Meets Expectations</b>	<b>Needs Development</b>
Attention skills			
Creativity, original thinking			
Motivation			
Ability to work independently			
Study habits			
Follows directions			
Intellectual curiosity			
Participation in class discussion			
Initiative in seeking help			
Oral expression of ideas			
Written expression of ideas			
Reading			
Mathematics			
Problem solving			
Small motor development			
Large motor development			

1. What are the first words that come to your mind that best describe this student?

2. Emotional development: feels good about him/herself, accepts limits and routine, makes transitions, handles frustration
  
3. Personal qualities: leadership, character, honesty, sense of humor, responsibility, concern for others
  
4. Interaction with other students: cooperation, respects the rights of others, willingness to share, takes responsibility for own action
  
5. Academic strengths/weaknesses/learning style(s)
  
6. Child's relationship with parents
  
7. Parent cooperation and involvement
  
8. To your knowledge is the parents' perception of the student compatible with the school's understanding of the student?
  
9. Comments or other information you believe might be helpful. Please feel free to attach additional pages if necessary:

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Teacher's Signature

Date

*Thank you for your time in completing this form. Please make a copy for your records and return a copy to Kimberton Waldorf School Admissions office.*