

THE INDEPENDENT SCHOOL

A Community of Excellence and Opportunity

Applicant

LAST NAME	FIRST NAME	MIDDLE INITIAL	PREFERRED NAME
ADDRESS – BILLING ADDRESS, YES <input type="checkbox"/> NO <input type="checkbox"/>	CITY	STATE	ZIP
PHONE	CELL PHONE	DATE OF BIRTH	
CURRENT GRADE LEVEL	<input type="checkbox"/> Half-day Junior-K <input type="checkbox"/> Full-day Junior-K <input type="checkbox"/> K-12 DESIRED GRADE LEVEL	DESIRED ENROLLMENT DATE	

Parents/Guardians

PARENT/GUARDIAN #1 – RELATIONSHIP TO APPLICANT: _____

LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS (IF DIFFERENT FROM APPLICANT) BILLING ADDRESS, YES <input type="checkbox"/> NO <input type="checkbox"/>	CITY	STATE	ZIP
PHONE	WORK PHONE	CELL PHONE	
E-MAIL ADDRESS			
EMPLOYER	OCCUPATION/TITLE		
WORK ADDRESS	CITY	STATE	ZIP

PARENT/GUARDIAN #2 – RELATIONSHIP TO APPLICANT: _____

LAST NAME	FIRST NAME	MIDDLE INITIAL	
ADDRESS (IF DIFFERENT FROM APPLICANT) BILLING ADDRESS, YES <input type="checkbox"/> NO <input type="checkbox"/>	CITY	STATE	ZIP
PHONE	WORK PHONE	CELL PHONE	
E-MAIL ADDRESS			
EMPLOYER	OCCUPATION/TITLE		
WORK ADDRESS	CITY	STATE	ZIP

HOW DO YOU WISH SCHOOL CORRESPONDENCE TO BE ADDRESSED:

MR. AND MRS. MR. MRS. MS. DR. AND MRS. MR. AND DR. DR. AND DR. OTHER _____

SENT TO: ADDRESS OF APPLICANT ADDRESS OF PARENT/GUARDIAN #1 ADDRESS OF PARENT/GUARDIAN #2

Siblings

NAME	GRADE	DATE OF BIRTH
NAME	GRADE	DATE OF BIRTH
NAME	GRADE	DATE OF BIRTH
NAME	GRADE	DATE OF BIRTH
NAME	GRADE	DATE OF BIRTH

Previous School(s) IF APPLICABLE

SCHOOL NAME	ADDRESS (INCLUDING CITY, STATE)		
PHONE	FAX	GRADES ATTENDED	DATES
REASON FOR TRANSFER			

SCHOOL NAME	ADDRESS (INCLUDING CITY, STATE)		
PHONE	FAX	GRADES ATTENDED	DATES
REASON FOR TRANSFER			

Has the applicant ever attended The Independent School before? Yes No

If yes, when? _____

How did you learn about The Independent School?

- Sibling Faculty Current Parent Alumni Word of Mouth Website
 Magazine Ad Newspaper Ad Legacy Open House Tour Other
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What do you believe is important for us to know to help meet your child's academic and social/emotional needs in school?

PARENT/GUARDIAN SIGNATURE

DATES

PARENT/GUARDIAN SIGNATURE

DATES

The Independent School admits students of any race, color, national, or ethnic origin to all rights, privileges, programs, and activities generally accorded or made available to students at the School. It does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational or admissions policies.