

# WALDORF SCHOOL of Princeton



APPLICANT APPLYING FOR:  PARENT CHILD  NURSERY  MIXED-AGE KINDERGARTEN  APPLICATION FOR GRADE \_\_\_\_\_

Student \_\_\_\_\_  
First Middle Last Nickname

Home Address \_\_\_\_\_  
Street City State Zip

Home Phone \_\_\_\_\_  Male  Female Date of Birth (DOB) \_\_\_\_\_

Place of Birth \_\_\_\_\_

First Language \_\_\_\_\_ Other Languages \_\_\_\_\_

Month/Year of Proposed Entrance \_\_\_\_\_

Present School \_\_\_\_\_ Current Grade \_\_\_\_\_

School Address \_\_\_\_\_  
Street City State Zip

School Phone \_\_\_\_\_ Name of Principal \_\_\_\_\_ Dates Attended \_\_\_\_\_

Other Schools Attended in Past Three Years:

School Name \_\_\_\_\_ Address \_\_\_\_\_ Dates \_\_\_\_\_

School Name \_\_\_\_\_ Address \_\_\_\_\_ Dates \_\_\_\_\_

Previous Waldorf Experience:  None  Playgroup  Preschool  Grade School  Camp

Specify where and when \_\_\_\_\_

**PLEASE LIST APPLICANT'S SIBLINGS**

Name \_\_\_\_\_ DOB \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Are there any other adults, paid or unpaid, who share responsibility for the child at home? Yes No

Name of Additional Caregiver: \_\_\_\_\_ Relationship to Student \_\_\_\_\_

**MOTHER/GUARDIAN**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Company \_\_\_\_\_

Company Address \_\_\_\_\_  
Street City State Zip

**FATHER/GUARDIAN**

Name \_\_\_\_\_

Home Address (if different) \_\_\_\_\_  
Street City State Zip

If different home address, send duplicate correspondence? Yes/ No

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Business Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Company \_\_\_\_\_

Company Address \_\_\_\_\_  
Street City State Zip

Applicant lives with:  Both parents, together  Both, alternately  Father  Mother  Other(specify): \_\_\_\_\_

Who is financially responsible for payment of tuition and other school expenses? \_\_\_\_\_

How did you hear about the Waldorf School of Princeton?  Current WSP Family  Friend  Teacher  Website  
 School Event \_\_\_\_\_  Other \_\_\_\_\_

This application is accompanied by a non-refundable application fee (\$50 for Nursery through 8<sup>th</sup> grade, \$25 for *Parent-Child* applicants)

**My signature below indicates that all information on this application is complete and factually presented.**

\_\_\_\_\_  
Signature of parent/legal guardian Date

*The Waldorf School of Princeton complies with all federal and state laws prohibiting discrimination in its admission and financial aid policies.*

APPLICANT'S NAME \_\_\_\_\_

PARENT/GUARDIAN QUESTIONS (PARENT-CHILD APPLICANTS ANSWER ONLY QUESTIONS 1-4)

1. Why are you interested in the Waldorf School of Princeton for your child?

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2. Give a brief narrative biography of your child, including any significant milestones or events that you feel were important to your child's development, such as a family move or other changes. Include such things as the approximate age at which she/he first crawled, walked, spoke, and toilet trained for *Parent-child* applicants.

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3. Describe a typical **weekday** with your child, including how she/he gets up in the morning and goes to bed at night, her/his daily routine, favorite activities, how meals are taken, regular chores, bedtime rituals, how much and what kind of television, computer, video time are allowed, and extracurricular activities.

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4. Describe a typical **weekend day** with your child, especially the weekend activities that your family enjoys and how your routine may differ from a typical weekday (schedules, activities, media, and entertainment).

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5. Describe your child including her/his disposition, learning style, artistic interests, areas of strength and weakness, academic ability, and social relationships.

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6. Is there anything else that you can tell us that will give us more insight on your child?

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7. If your child is transferring from another school, include your reasons for doing so.

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(A separate page may be attached if needed.)

Signature

Print Name

Date