



## Elementary Application Form Grades 1-5

A non-refundable application fee of \$40 must accompany this application.  
Please include a recent photograph of your child.

Child's Full Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Gender \_\_\_\_ Applying for Grade \_\_\_\_\_

Desired Date of School Entrance \_\_\_\_\_

Parent 1: Full Name \_\_\_\_\_ Nature of Work/Business \_\_\_\_\_

Physical Address: \_\_\_\_\_ Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent 2: Full Name \_\_\_\_\_ Nature of Work/Business \_\_\_\_\_

Physical Address: \_\_\_\_\_ Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

If parents have separate addresses, child lives with: (Please mark with an X) \_\_\_Parent 1 \_\_\_Parent 2 \_\_\_Both

Correspondences should be addressed to: (Please mark with an X) \_\_\_Parent 1 \_\_\_Parent 2 \_\_\_Both

How did you hear about the White Mountain Waldorf School?

**We are grateful for the information you give us on the following pages. It will help us to understand your child's needs and will remain confidential.**

Please write a brief biography of your child and attach to this application and be sure to include:

- Birth history
- Age at which your child crawled, walked, talked
- Sleeping and eating habits
- Early health, illnesses or injuries
- Relationship with siblings
- Family moves or other significant changes in family life
- Provisions for childcare by other than parents
- Anything else you feel is pertinent to your child's biography that has not been covered above.

Please list names and ages of other children in the family.

Name	Age	Birth Date	School

Please describe your child's previous group experience (in play groups, child care settings, Sunday school, etc.)

Please list previous schools attended and teachers we may contact for references.

Name of School	Name of Teacher	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please explain why you are interested in The White Mountain Waldorf School for your child. What do you hope your child will gain from his or her school experience?

What has been your exposure to Waldorf philosophy? How did you learn about the school?

Please describe your child in terms of his or her interests, temperament and personality traits, hobbies, dislikes, favorite activities, toys, etc.

Please list private lessons and/or sports programs in which your child engages.

How many hours a week does your child spend watching TV or videos? \_\_\_\_\_

How many hours a week does your child spend playing electronic or computer games? \_\_\_\_\_

Is your child currently experiencing any major health difficulties? Are there any difficulties with vision, hearing, walking, or speaking? Please identify any health situations the school should know about, such as allergies, therapies (physical or psychological), medications.

Does your child have any learning disabilities? Please describe any academic/social-psychological evaluations that your child has experienced.

If you are transferring your child from another school you may wish to include your reasons for doing so.

Please tell us anything else about your child that you feel would be important for us to know.

Tuition assistance is available for the elementary program. Will you be applying for tuition assistance? \_\_\_\_\_

\$40 Application Fee Paid \_\_\_\_\_ please circle one: cash credit check# \_\_\_\_\_

\*Applications are considered complete when all of the steps on the Admissions Checklist are finished.

Who is financially responsible for school expenses? \_\_\_\_\_

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date

*The White Mountain Waldorf School does not discriminate on the basis of race, color, gender, sexual orientation, religion, national or ethnic origin in its admissions or educational policies*