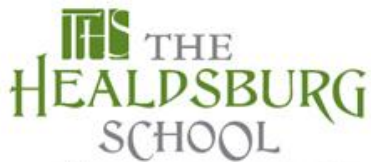


Inspiring Compassionate Leaders Through Academic Excellence

ADMISSIONS PROCEDURES CHECKLIST

The Healdsburg School is currently accepting applications for the 2011-2012 and 2012-2013 academic years. **All Admissions procedures listed below must be completed by February 1, 2012 for consideration for the 2012-2013 academic year.**

<p>Kindergarten (Ages 5- 6)</p>	<ul style="list-style-type: none"> ✓ Students must be a minimum of 5 years of age on or before September 30th. ✓ A completed "Applicant and Family Information" form ✓ A \$125 non-refundable application fee ✓ A completed "Parent/Guardian Statement" form ✓ A signed and dated "Student Release of Information and Records" form ✓ **A "Teacher Recommendation for Students Entering Kindergarten" form, <u>completed no earlier than December</u> ✓ If applicable, submission of Tuition Support Forms to TADS by January 21, 2012 ✓ A formal academic assessment: February 4 or February 11, 2012 to be arranged with the Admissions Office
<p>Grades 1 – 4 (Ages 6 – 10)</p>	<ul style="list-style-type: none"> ✓ A completed "Applicant and Family Information" form ✓ A \$125 non-refundable application fee ✓ A completed "Parent/Guardian Statement" form ✓ A signed and dated "Student Release of Information and Records" form ✓ **A "Core Academic Teacher Recommendation for Students Entering Grades 1-4" form, <u>completed no earlier than December</u> ✓ A completed "Recommendation from Mentor, Coach, or Other Adult (grades 1-8)" form ✓ If applicable, submission of Tuition Support Forms to TADS by January 21, 2012 ✓ A formal academic assessment and "shadow" visit day to be arranged with the Admissions Office
<p>Grades 5 – 8 (Ages 10 – 14)</p>	<ul style="list-style-type: none"> ✓ A completed "Applicant and Family Information" form ✓ A \$125 non-refundable application fee ✓ A completed "Parent/Guardian Statement" form ✓ A completed "Student Statement" form ✓ A signed and dated "Student Release of Information and Records" form ✓ **A completed "Math Teacher Recommendation for Students Entering Grades 5-8" form ✓ **A completed "English Teacher Recommendation for Students Entering Grades 5-8" form ✓ A completed "Recommendation from Mentor, Coach, or Other Adult (grades 1-8)" form (<i>optional for grades 5-8</i>) ✓ If applicable, submission of Tuition Support Forms to TADS by January 21, 2012 ✓ A formal academic assessment and "shadow" visit day to be arranged with the Admissions Office <p><i>**Contact the Director of Admissions if you are unable to satisfy this requirement.</i></p>



A K-8 INDEPENDENT SCHOOL

Inspiring Compassionate Leaders Through Academic Excellence

Applicant and Family Information

Student Information *(please print)*

Name *First, Middle, Last*

Gender M F

Home Address

City, State, Zip code

Date of Birth

Place of Birth

Applying for Grade

Beginning Fall of which year?

Ethnicity (optional)

Current and former schools attended

Parent/Guardian Information I *(please print)*

Name *First, Last*

Title: Mr. Mrs. Miss Ms. Dr. Other

Relation to applicant

Home Address (if different from above)

City, State, Zip code

Occupation

Title

Employer/Firm

Business Address

Business Phone

Cell Phone

Home Phone

Email Address

Parent/Guardian Information II *(please print)*

Name *First, Last*

Title: Mr. Mrs. Miss Ms. Dr. Other

Relation to applicant

Home Address (if different from above)

City, State, Zip code

Occupation

Title

Employer/Firm Title

Business Address

Business Phone

Cell Phone

Home Phone

Email Address

Siblings *(please print)*

Please list any siblings.

Name Birth date School of Attendance F M

Name Birth date School of Attendance F M

Name Birth date School of Attendance F M

References

Names of two adults, other than teachers, who can provide a personal reference for this student: *(please print)*

Name Relationship Telephone Email

Name Relationship Telephone Email

Other Contacts

If correspondence from the school, assessment reports, or any other school information should be sent to an address *other than or in addition to* the applicant's home address, please indicate:

Name of recipient at other address *(please print)* Relationship to Student

Address

City, State, Zip code Telephone Email

How did you learn about The Healdsburg School? _____

Name of parent/guardian completing this form
(please print)

Signature of parent/guardian completing this form

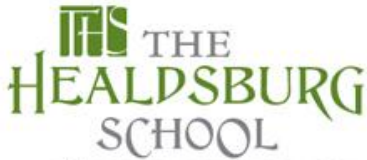
Date

Signature of applicant (grades 5-8 only)

Date

Please mail your application, along with the \$125.00 application fee, to:

The Healdsburg School, Office of Admissions, 33 H Healdsburg Avenue, Healdsburg, CA 95448



A K-8 INDEPENDENT SCHOOL

Inspiring Compassionate Leaders Through Academic Excellence

Student Release of Information and Records Form

Parents/Guardians

Please complete this form by signing both the release of records, as well as the confidentiality waiver below, and return to The Healdsburg School. We will fax this form to the appropriate school.

School

The student listed below has applied for admission to The Healdsburg School. Please send us copies of this student's report cards for the current academic year, as well as the previous two academic years (if applicable). Additionally, please forward copies of all attendance records, disciplinary reports, and results of standardized tests to: **The Healdsburg School, Office of Admissions, 33-H Healdsburg Avenue, Healdsburg, CA 95448.**

Student's Name (please print) _____
First Middle Last
Applying to grade Birth date
Years the applicant attended their present school Last grade attended at this school

School Name (please print) _____

Address City, State, Zip code Telephone

Main Contact Person (please print) Title

Parent/Guardian Records Release Authorization

Name of parent/guardian (please print) Telephone

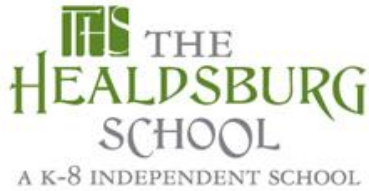
Signature of parent/guardian Date

Parent/Guardian Confidentiality Waiver Agreement

I acknowledge that I waive my right to read any confidential material that the school may provide as a part of this release of records form.

Name of parent/guardian (please print)

Signature of parent/guardian Date



Inspiring Compassionate Leaders Through Academic Excellence

Parent/Guardian Statement

Please answer the questions below on a separate piece of paper. Sign this sheet and staple it to your answers. Parents/guardians must fill out a separate statement for each child applying to the school. Thank you for taking the time to give us a comprehensive picture of your child and family.

Student's Full Name (please print): _____

Applying to enter grade: K 1 2 3 4 5 6 7 8

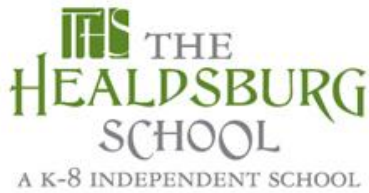
Applying for entrance in: 2011-2012 2012-2013 2013-2014

1. Describe the ideal school environment for your child.
 2. What are your child's greatest strengths and challenges as both a student and a person?
 3. What are your long-term goals for your child?
 4. What are your short-term goals for your child?
 5. How does your child feel about the following?
 - school
 - home
 - him/herself
 6. What are your child's and family's special interests and extracurricular activities?
 7. What is your child's primary language? To what extent are other languages spoken in the home?
 8. What has been your involvement in your child's education, and what would you prefer it to be?
 9. Please describe the most important values by which you and your family live. How do you instill and reinforce those values with your children? What expectations do you have about the school's involvement in your child's ethical and social/emotional growth?
 10. Describe your child's previous school experience(s). (If applicable, please comment on your reasons for applying to THS.)
 11. Has your child ever repeated a grade or been promoted more than one grade level? If yes, please elaborate.
 12. Is your child currently seeing, or has your child ever seen, a psychologist, psychiatrist, or counselor?
 Yes No
- If yes, please elaborate and send a copy of any assessments/evaluations to the Admissions Office. Please also feel free to make an appointment to discuss the matter with our Head of School and Director of Admissions.*
13. Does your child take medication or have medical conditions that require special treatment? Please elaborate.

Name of parent/guardian completing this form (please print)

Signature

Date



Inspiring Compassionate Leaders Through Academic Excellence

Student Statement for Applicants to Grades 5-6

We'd like to get to know you better. Please answer the following questions in short paragraphs on a separate piece of paper, then sign this sheet and staple it to your answers. There are no wrong answers to these questions—just ideas that come from within you!

Your Full Name (*please print*): _____

Applying to enter: 5th grade 6th grade

1. Please give us an idea of who you are as a student:

- How do you learn best?
- What academic subject do you enjoy the most?
- Is there an academic subject that you do not enjoy?
- Which subjects do you find most difficult?
- In which subjects do you excel?

2. Tell us about something you learned that was very important and exciting to you. Why was this experience important?

3. What have you always wanted to do or learn that you have not done yet? Why does this interest you? What are your ideas to accomplish this?

4. Please give us an idea of who you are:

- What do you like about yourself the most?
- What do you want to improve about yourself?
- How would your friends describe you?

5. What are your favorite hobbies and activities outside of school? What do you enjoy about these?

6. Tell us about a person whom you respect and why.

7. If you could change one thing in the world, what would it be? Why is this important to you?

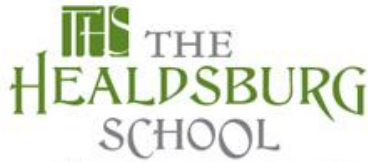
8. How much time do you spend on homework each night?

9. What book did you most enjoy reading in the past year and why?

10. If you could change one thing about your experience in school, what would it be? Why?

Student signature

Date



A K-8 INDEPENDENT SCHOOL

Inspiring Compassionate Leaders Through Academic Excellence

English Teacher Recommendation for Students Entering Grades 5-8

Student's Full Name *(please print)*: _____

School Name *(please print)*: _____

Applying to enter: Grade 5 Grade 6 Grade 7 Grade 8

To the parent/guardian: *Please sign the release form below and give this form to your child's teacher with a stamped envelope addressed to **The Healdsburg School, Office of Admissions, 33-H Healdsburg Avenue, Healdsburg, CA 95448.***

For the student named above, I acknowledge that I waive my right to read this confidential teacher recommendation.

Name of parent/guardian *(please print)* _____ Telephone _____

Signature of parent/guardian *(please print)* _____ Date _____

To the teacher: This student is a candidate for admission to The Healdsburg School, an independent private school for grades K – 8. Your thoughtful and candid evaluation of the applicant will be of great assistance to our Admissions Office and is truly appreciated. **Your assessment will be held in confidence, as noted above.** Please mail this form directly to The Healdsburg School in the envelope that the family has provided. If you have any questions, please contact The Healdsburg School Admissions Office at 707.433.4847.

Name of the teacher completing this form *(please print)* _____ Date _____

Address _____

City, State, Zip code _____ Telephone _____

Email address _____

Please comment briefly on the following: *(Feel free to use the back of this page, or add pages, to elaborate on your comments.)*

- Please describe this student's special or unusual characteristics and strengths and/or interests and talents.
- Any challenges?
- Which three words best describe this student?
- How well do you know this applicant?

1. What text and/or program are you currently using (year of publication: _____):
2. Please comment on this student's reading and written language foundations along with their emerging skills in these academic areas.
3. What skills has this student mastered?
4. Please elaborate on this student's performance as compared with his/her ability.
5. Please comment on the classroom setting you think would most benefit this student and what teaching techniques work best with him/her.
6. Please share with us any thoughts you have regarding the student's family, expectations for their child, their cooperation with you, and their contribution to the school community.

How would you recommend this candidate?

- with great enthusiasm
 with confidence
 with some confidence
 reluctantly
 I do not recommend (*please explain*)

Please assess the student's level of development in the following areas:

<u>Academic/Personal Characteristics</u>	<u>Superior</u>	<u>Age Appropriate</u>	<u>Still Developing</u>	Comments
Level of maturity				
Critical thinking				
Intellectual aptitude				
Study habits				
Honesty and integrity				
Organizational skills				
Academic motivation				
Academic achievement				
Academic potential				
Ability to follow directions				
Completion of tasks				
Listening skills				
Reading skills				
Writing skills				
Participation in class discussions				
Ability to make transitions				
Kindness to others				
Ability to use constructive criticism				
Responsibility for work				
Respect for differences in others				
Reaction to setbacks				
Relationships with peers				
Rapport with adults				
Ability to develop friendships				
Ability to resolve conflicts				
Willingness to accept a challenge				

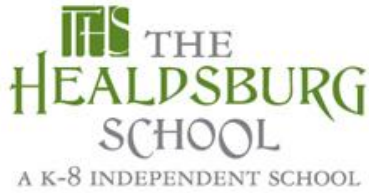
- Approximately how many days of schooling did this student miss last year or during the year in which you were his or her instructor?
- We welcome any additional information you think would be helpful in assessing this student.
- Do you have information about this student that can be better conveyed in a phone call? Yes / No

Signature _____

Date _____

Best Contact Number _____

Many thanks for your assistance in providing us with this information.



Inspiring Compassionate Leaders Through Academic Excellence

Math Teacher Recommendation for Students Entering Grades 5 - 8

Student's Full Name (please print): _____

School Name (please print): _____

Applying to enter: Grade 5 Grade 6 Grade 7 Grade 8

To the parent/guardian: Please sign the release form below and give this form to your child's teacher with a stamped envelope addressed to **The Healdsburg School, Office of Admissions, 33-H Healdsburg Avenue, Healdsburg, CA 95448.**

For the student named above, I acknowledge that I waive my right to read this confidential teacher recommendation.

Name of parent/guardian (please print) _____ Telephone _____

Signature of parent/guardian (please print) _____ Date _____

To the teacher: This student is a candidate for admission to The Healdsburg School, an independent private school for grades K – 8. Your thoughtful and candid evaluation of the applicant will be of great assistance to our Admissions Office and is truly appreciated. **Your assessment will be held in confidence, as noted above.** Please mail this form directly to The Healdsburg School in the envelope that the family has provided. If you have any questions, please contact The Healdsburg School Admissions Office at 707.433.4847.

Name of the teacher completing this form (please print) _____ Date _____

Address _____

City, State, Zip code _____ Telephone _____

Email address _____

Please comment briefly on the following: (Feel free to use the back of this page, or add pages, to elaborate on your comments.)

- Please describe this student's special or unusual characteristics and strengths and/or interests and talents.
- Any challenges?
- Which three words best describe this student?
- How well do you know this applicant?

Math Teacher Recommendation for Students Entering Grades 5-8 (pg. 3 of 3)

How would you recommend this candidate?

- with great enthusiasm
 with confidence
 with some confidence
 reluctantly
 I do not recommend (*please explain*)

Please assess the student's level of development in the following areas:

<u>Academic/Personal Characteristics</u>	<u>Superior</u>	<u>Age Appropriate</u>	<u>Still Developing</u>	Comments
Level of maturity				
Critical thinking				
Intellectual aptitude				
Study habits				
Honesty and integrity				
Organizational skills				
Academic motivation				
Academic achievement				
Academic potential				
Ability to follow directions				
Completion of tasks				
Listening skills				
Reading skills				
Writing skills				
Participation in class discussions				
Ability to make transitions				
Kindness to others				
Ability to use constructive criticism				
Responsibility for work				
Respect for differences in others				
Reaction to setbacks				
Relationships with peers				
Rapport with adults				
Ability to develop friendships				
Ability to resolve conflicts				
Willingness to accept a challenge				

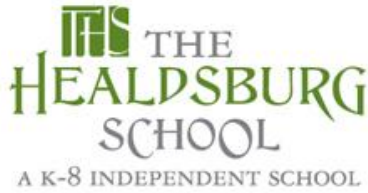
- Approximately how many days of schooling did this student miss last year or during the year in which you were his or her instructor?
- We welcome any additional information you think would be helpful in assessing this student.
- Do you have information about this student that can be better conveyed in a phone call? Yes / No

Signature

Date

Best Contact Number

Many thanks for your assistance in providing us with this information.



Inspiring Compassionate Leaders Through Academic Excellence

Recommendation from Mentor, Coach or Other Adult (grades 1-8)

Student's Full Name *(please print)*: _____

School Name *(please print)*: _____

Applying to enter: Grade 1 Grade 2 Grade 3 Grade 4 Grade 5 Grade 6 Grade 7 Grade 8

To the parent/guardian: *Please sign the release form below and give it to the evaluator with a stamped envelope addressed to The Healdsburg School, Office of Admissions, 33-H Healdsburg Avenue, Healdsburg, CA 95448.*

For the student named above, I acknowledge that I waive my right to read this confidential recommendation.

Name of parent/guardian *(please print)* _____ Telephone _____

Signature of parent/guardian *(please print)* _____ Date _____

To the evaluator: This student is a candidate for admission to The Healdsburg School, an independent private school for grades K – 8. Your thoughtful and candid evaluation of the applicant will be of great assistance to our Admissions Office and is truly appreciated. **Your assessment will be held in confidence, as noted above.** Please mail this form directly to The Healdsburg School in the envelope that the family has provided. If you have any questions, please contact The Healdsburg School Admissions Office at 707.433.4847.

Name of the evaluator completing this form *(please print)* _____ Date _____

Address _____

City, State, Zip code _____ Telephone _____

Email address _____

Please comment briefly on the following: *(Feel free to use the back of this page, or add pages, to elaborate on your comments.)*

- Please describe this student's special or unusual characteristics and strengths and/or interests and talents.
- Any challenges?
- Which three words best describe this student?
- How well do you know this applicant?

Recommendation from Mentor, Coach or Other Adult (grades 1-8) (pg. 2 of 2)

How would you recommend this candidate?

- with great enthusiasm
 with confidence
 with some confidence
 reluctantly
 I do not recommend (*please explain*)

Please assess the student's level of development in the following areas:

<u>Academic/Personal Characteristics</u>	<u>Superior</u>	<u>Age Appropriate</u>	<u>Still Developing</u>	Comments
Level of maturity				
Critical thinking				
Intellectual aptitude				
Study habits				
Honesty and integrity				
Organizational skills				
Academic motivation				
Academic achievement				
Academic potential				
Ability to follow directions				
Completion of tasks				
Listening skills				
Reading skills				
Writing skills				
Participation in class discussions				
Ability to make transitions				
Kindness to others				
Ability to use constructive criticism				
Responsibility for work				
Respect for differences in others				
Reaction to setbacks				
Relationships with peers				
Rapport with adults				
Ability to develop friendships				
Ability to resolve conflicts				
Willingness to accept a challenge				

- We welcome any additional information you think would be helpful in assessing this student.

- Do you have information about this student that can be better conveyed in a phone call? Yes / No

Signature _____

Date _____

Best Contact Number _____

Many thanks for your assistance in providing us with this information.

▪ (*Supplemental Recommendation pg. 2 of 2*)