

High School Application

Application to be completed by parent or guardian. High School applicants must be 14 years old by May 1 for fall entry into our ninth grade.

New applicants only:

Please return with non-refundable \$150.00 application fee. New student applications are accepted after January 15 throughout the school year. However, admissions interviews are conducted pending space availability. Upon acceptance, you will receive registration materials to be completed within 2 weeks.

Re-enrolling students only:

Application fee is waived for re-enrolling students. The application deadline is January 15. We encourage you to return your application early to be able to meet your January 31 registration deadline.

All students:

Please attach the "High School Student Questionnaire" completed by your son or daughter. The Questionnaire should demonstrate the independent work of your student so please do not complete it for your child.

Please note: enrollment is limited to 20 students per grade.

APPLICANT INFORMATION

Applying for start date of (month/year): _____

Name of Applicant _____ Grade _____

Nickname _____ Date of Birth ____/____/____ Gender: F M

I will be applying for Tuition Assistance. Please mail me Tuition Assistance application instructions. Tuition Assistance is reserved for families experiencing *severe economic hardship*. An adjustment may be possible based on individual review of the family's economic ability to pay relative to the financial requirements of the school, with a maximum discount limit of 60% for Gr.9-12 and siblings.

PARENTS OF STUDENTS CURRENTLY ENROLLED IN WSSD'S EIGHTH GRADE SHOULD SKIP AHEAD TO PAGE 5.

Please
Attach Photo
Of Child
Here.

Mother/Guardian _____ Address _____

City _____ Zip _____

In order of priority, please list best telephone numbers to reach you:

(_____) _____ Cell Home Work

(_____) _____ Cell Home Work

(_____) _____ Cell Home Work

Email _____ Occupation _____

Name and type of business _____

Father/Guardian _____ Address _____

City _____ Zip _____

In order of priority, please list best telephone numbers to reach you:

(_____) _____ Cell Home Work

(_____) _____ Cell Home Work

(_____) _____ Cell Home Work

Email _____ Occupation _____

Name and type of business _____

If applicable.....

Step-Mother _____ Step-Father _____

Occupation _____ Occupation _____

Name of Business _____ Name of Business _____

Work Telephone _____ Work Telephone _____

Cell Phone _____ Cell Phone _____

Email _____ Email _____

Applicant lives **primarily** with: Both Parents Mother Father Other _____

If applicant is **NOT** living with both parents, please summarize child-sharing/custody arrangements and any visitation restrictions: _____

If applicant is **NOT** living with both parents please note the age at which child stopped living with both parents: _____ Child has never lived with both parents

If applicant is **NOT** living with both parents, the primary contact info for the applicant should be that of:
 Mother/Guardian OR Father/Guardian

Tuition to be paid by: _____

Brothers and sisters of applicant

Name: _____ Age _____ Grade _____ School _____

Name: _____ Age _____ Grade _____ School _____

Name: _____ Age _____ Grade _____ School _____

Are you applying to The Waldorf School of San Diego for any of your other siblings? Yes No

If **yes**, which child(ren)?: _____

EXPERIENCE WITH OUR SCHOOL

Have you and your child attended a High School Open House at our school? Yes No

If YES, list date: ___/___/___

Please indicate your interest in The Waldorf School of San Diego. Include materials you have read, lectures attended, and how you heard of the school. Were you referred by someone previously or currently at the school?

The Waldorf School of San Diego is a *community* school so parents are expected to join us in the adventure of education. If your child were to be admitted to the school, in what ways would you be interested in participating?

Do you expect your child to attend The Waldorf School of San Diego through twelfth grade? _____

Is your child looking forward to changing schools? Yes No

If **NO**, please elaborate:

What are your hopes for your child's high school education?

EXPERIENCE WITH PREVIOUS SCHOOLS

Please list applicant's previous schools starting with the current school.

- Current School _____ Dates attended _____ Grades attended _____
Address _____ Tel. _____
Name of School Counselor or other school contact _____
Permission to contact? Yes No
- Previous School _____ Dates attended _____ Grades attended _____
Address _____ Tel. _____
Name of School Counselor or other school contact _____
Permission to contact? Yes No
- Previous School _____ Dates attended _____ Grades attended _____
Address _____ Tel. _____
Permission to contact? Yes No
- Previous School _____ Dates attended _____ Grades attended _____
Address _____ Tel. _____
Permission to contact? Yes No

Please give a summary of your experiences with any Waldorf schools listed on page 4:

Please give a summary of your experiences with any non-Waldorf schools listed on page 4 including a description of the school's environment and focus.

PARENTS OF STUDENTS CURRENTLY ENROLLED IN WSSD'S EIGHTH GRADE SHOULD RESUME THE APPLICATION AT THIS POINT AND COMPLETE ALL FURTHER QUESTIONS.

How has your child done in school? Please list both successes and concerns.

Please describe any special circumstances you feel have affected your child's previous school experience. Use an additional sheet of paper if necessary.

HEALTH INFORMATION

Please identify your child's health **history**. List all notable illnesses (include chronic conditions), accidents and injuries along with applicable diagnoses and therapies used (physical and psychological). Use an additional sheet of paper if necessary.

Please identify any **current** health situation your child is experiencing that would have impact at school and of which the teacher should be aware. List applicable diagnoses and therapies in use (physical and psychological). Use an additional sheet of paper if necessary.

Any dietary restrictions? If **YES**, please elaborate:

Has your child been diagnosed with any developmental or learning disabilities? Yes No
If **YES**, please explain:

Has your child received, or is now receiving special tutoring, counseling or therapy? Yes No
If **YES**, please describe nature and length of treatment or tutoring. Use additional sheet if necessary.

Is your child currently on medication of any kind? Yes No
If **YES**, please elaborate including history. Use additional sheet if necessary.

Does your child have any special needs due to a health condition? Yes No
If **YES**, please elaborate:

To your knowledge, has your child ever experimented or habitually used alcohol or illegal drugs, including marijuana? If so, please describe.

CHILD'S CURRENT HOME ENVIRONMENT

In order to meet the needs of your child we feel that it is beneficial for us to understand your child's home life, habits and interests.

What is the primary language spoken in your child's home? _____

How long has your child lived at your current residence? _____

Describe your child's home life. Tell us about any current responsibilities they have at home and how they spend their free time:

Describe your child when confronting a new situation:

What is your child's emotional response to frustration?

How do you respond to your child's frustration?

What do you enjoy most about your child?

What do you consider his/her challenges?

What is the most important thing for us to know about your child?

Please describe your child's relation to schoolwork and homework:

Please describe your child's extracurricular activities such as sport teams, hobbies, etc. How much time does your child spend in those activities and how does he or she feel about those activities?

Are you willing to adjust your child's scheduled extracurricular activities to ensure he or she succeeds academically and socially at our high school? Yes No

Do you have any questions that you would like to ask us? Yes No

If **YES**, please list them:

Thank you for your time. We appreciate your thoughtful responses and look forward to meeting with you. Upon receipt of this application, we will contact you to arrange convenient interview times. Parents and students are interviewed separately.

Teacher recommendation forms are also required for all applicants. See the attached Teacher Recommendation Form for instructions.

For new applicants to WSSD, we require records from your child's current school. Your student's Teacher Recommendation Forms and school records must be received by WSSD prior to final consideration for placement.

Placement at the Waldorf School of San Diego is based upon teacher acceptance.

Waldorf School of San Diego

High School Student Questionnaire

This is an opportunity for you to introduce yourself to us. Please answer the following questions fully and honestly and without the help of your parents. Try to write what you really feel, not what you think we would like to hear. There are no right or wrong answers.

Please answer in your own handwriting.

Name _____ Nickname _____
 First Middle Last

Address _____ Phone Number _____

Please tell us what you like most and least about the following subjects:

English

Science

Math

History

Foreign Language

PLEASE TELL US ABOUT YOUR INTERESTS:

How often do you read on your own?

Tell us about one of your favorite books.

How often do you watch TV? What programs do you enjoy?

Do you enjoy going to the movies? If so, please mention some movies you have really liked.

Do you spend time online? If so, what sites do you visit?

What sports do you like playing?

What kinds of art do you enjoy?

What kinds of art would you like to try?

Do you play an instrument? How long have you been playing? Do you enjoy playing?

Do you like to sing?

Have you ever danced? If not, are you ready to try?

Have you ever been in a play? Describe your experience.

Do you have any regular responsibilities at home such babysitting, chores, or yard work?

Tell us about the kinds of things you enjoy doing outdoors.

What else do you like to do in your free time?

How do you feel about homework?

The Waldorf School of San Diego's faculty and students work hard to create a healthy social life. The school does not allow the use of drugs, alcohol or tobacco. Are you willing to abide by this policy?

Please explain why you want to come to the Waldorf School of San Diego.



High School Application Teacher Recommendation Form

Student _____

Instructions for high school applicants: Pass copies of this form to two different teachers who know you well. One of these teachers should be a math or science instructor; the other can be a teacher in any other subject. The teachers are responsible for returning the completed form to the school. (Students currently enrolled in WSSD should have their eighth grade class teacher complete the form. No second recommendation is necessary).

Instructions for teachers: Please write a brief, descriptive statement regarding this student's academic and personal qualities. Include his or her strengths and any marked difficulties in reading, writing, or mathematical skills. Also, indicate the care and form shown in the student's work, as well as observations about the student's self-direction, cooperation with others and involvement in school activities. You may use the space below or attach your statement to this form. **Our application deadline is January 15, 2010.**

Signed _____ Position / Subject _____

School _____ Date _____ Telephone (____) _____

Please return directly to: The Waldorf School of San Diego, 4135 54th Place, San Diego, CA 92105. You may fax directly to: 619.280.8071. Attn: High School Admissions.