

Grades 1-8 ~ Application for Admission

Grade Applying For

1 2 3 4 5 6 7 8

School Year

2020-2021 2021-2022 2022-2023

Family Information

Student's Full Legal Name:

Date of Birth: _____ Gender Identity: _____

Primary Address: _____

Postal Code: _____

School Currently Attending: _____ Grade: _____

Current Teacher: _____ May we contact them? _____

School Address: _____

School Phone: _____ School Email: _____

Household 1 Information

Parent/Guardian Name:

Address: _____

Postal Code: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Email: _____

Spouse/Partner Name:

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Email: _____

Household 2 Information (if applicable)

Parent/Guardian Name:

Address (if different from student's): _____

Postal Code: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Email: _____

Spouse/Partner Name:

Home Phone: _____ Business Phone: _____

Cell Phone: _____ Email: _____

Financial Responsibility & Notices

Who is financially responsible: _____

School reports/parent notices sent to: _____

Sibling Information

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Student Information

How is your child's general health? _____

Does your child have allergies? _____

What immunizations has your child received? (please check)

Diphtheria Pertussis Tetanus Polio Hib

Measles Mumps Rubella Hepatitis B None

Provide a copy of your child's immunization booklet

What are your child's special interests? _____

The Waldorf philosophical approach believes that limiting media exposure for children and youth improves learning and has the potential to accelerate age-appropriate development in preparation for later learning. How much time each day does your child spend on technology of any kind?

Does your child participate in private lessons or sports activities? (describe)

Please describe your child's educational experience up until now?

How would you describe your child's social/emotional development?

What responsibilities does your child have at home?

Language(s) spoken at home: _____

Have you ever sought counselling or a professional evaluation for your child?

Yes No

If yes, please provide a copy of the results.

Date	Type of Evaluation
	Speech and language
	Referral for hearing evaluation
	Referral for vision testing
	Testing for learning challenges
	Psychological evaluation and/or counseling
	Sensory and motor evaluation (OT and PT)

Is there anything else that you feel we should know about your child's development and needs?

Why Waldorf?

Why would you like your child to attend the Halton Waldorf School?

What do you hope to receive from our program for your child and family?

How did you hear about Halton Waldorf School?

- Friend or neighbour Current or former parent of HWS
- Web research Our Kids website Flyer or poster
- Newspaper ad (specify which one) _____
- Other (please specify) _____

Expectations

The healthy life of the school relies strongly on parents'/guardians' participation in their child's education. Class meetings each term give parents/guardians the opportunity to learn about the curriculum, share concerns and plan activities to support the social life of the class. It is expected that at least one guardian from the family attend all such meetings.

Signature of Parent(s) or Guardian(s)

Date

Signature of Parent(s) or Guardian(s)

Date

Admission Checklist

Have you included the following items in your application?

- Completed and signed application form
- \$350 application fee
- Copy of birth certificate
- Copy of immunization record or statement of vaccine exemption

- IEP documentation (if applicable)
- Educational-Psychological assessment report (if applicable)
- Developmental optometrist report (if applicable)
- OT or PT report (if applicable)
- Vision or hearing test (if applicable)