

## PLEASE RETURN THIS FORM TO:

Julie Fredlund (jfred@rumseyhall.org)

## PARENT QUESTIONNAIRE CLASS OF 2024

## **Secondary School Counseling Office**

Stude	nt's NameLast Nam	ne First Name	Middle Name
1. When	School Criteria considering your child (1 = most important to	's next school, please <b>rank i</b> t o 7 = least important)	n order of importance
	Location Academics Affordability Financial Aid Athletics Arts (both visual an	nd performing)	
	Extra Curricular A	ctivities	
Schoo	ol Size – (100<, 100-250	), 250-400, 400-600, >600) _	
Locat	ion – (Region, radius fr	com your home, proximity to	which airport?)
Are th	ere any schools or region	ons which your family will n	ot entertain as secondary school options?
Acado	emic Program – Comm	nent briefly on the academic	program you seek for your child.
		·	igious or residential life programs do you think are
	_	_	ograms do you feel are most essential for your child
			nportant for your child and what are your
experi			r school, I cannot speak more highly of my are exploring options, are you open to considering a

2. Financial Aid	
We know for certain we will not be applying for I	Financial Aid for secondary school.
Knowing that Day Tuitions are >\$45,000 and Boarding Tu	itions are >\$60,000, do you feel you will <b>need</b> to
apply for financial aid? Please comment:	
If you will be applying for <b>financial aid</b> would your family How wide of a net, geographically, would you be willing to	
3. General Knowledge & Contact	
Are there any particular schools that you know about which	n you have interest?
Do you have any family legacies at any particular schools?	
It is not expected that you have made contact with any schools and the nature of the contact.	pols at this time, but if you have, please list below
4. Additional Comments	
If you have any additional comments about your aspiration process, please feel free to explain below:	s, concerns or expectations in the school search
Parent's Name	Date
Parent's Signature	THANK YOU!!