

# APPLY

## How to

34

**“We are so pleased with the entire experience, from our son’s first inquiry, to assistance with the application, the weeks in session with the staff and faculty, the trips and activities, all the way through to the final reports. Thank you to all.”**

—Heather

## Steps to follow:

**1.**

Fill out application **Form A**, including your course selections.

**2.**

Next, ask your parents to sign the form and complete the payment information for the \$75 application fee.

**3.**

To email a secure file, visit **taftschool.leapfile.net** or fax to 860-945-7859.

**4.**

Ask your teachers, school head, or guidance counselor to complete **Forms B, C, and D** and submit the documents, along with a copy of your **TRANSCRIPT**, to the Summer School office.

*Note: If you applied to Taft for the 2020–2021 academic year, you don't need to send additional recommendations. Simply send Form A, and we'll do the rest.*

## What happens next?

We seek students striving for excellence. The atmosphere at Summer School is informal, but the program is designed with the expectation that you're willing to work hard to enhance your academic profile.

Your application will be evaluated on the basis of your recommendations and academic record. We're particularly interested in students whose enthusiasm will allow them to take full advantage of the program offerings. An interview is not required, but campus visits are always welcome and encouraged. Contact our office, if you would like to schedule a tour.

Once your application is complete, you can expect to hear from our office within a few days. There is no official deadline, and applications are accepted until the program is full. At that point, a waitlist will be established. To ensure that space is available, early application is recommended.

**Go to [taftschool.org/summer](https://taftschool.org/summer) or [facebook.com/taftsummerschool](https://facebook.com/taftsummerschool) for more information.**

# Application



## SUMMER @ TAFT

THE TAFT SCHOOL, WATERTOWN, CONNECTICUT 06795

**APPLICANT:** \_\_\_\_\_  
FIRST NAME MIDDLE NAME LAST NAME  
Home address \_\_\_\_\_  
STREET CITY STATE ZIP COUNTRY  
Date of birth   /  /    Male  Female Present grade    Email \_\_\_\_\_  
M D Y  
Country of citizenship \_\_\_\_\_ Country of birth \_\_\_\_\_  
Have you applied to Taft for the 2020–21 school year?  Yes  No

**PARENT 1:** \_\_\_\_\_  
TITLE FIRST NAME LAST NAME  
Address \_\_\_\_\_  
(IF DIFFERENT THAN ABOVE) STREET CITY STATE ZIP COUNTRY  
Home phone \_\_\_\_\_ Business phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
Email (required) \_\_\_\_\_

**PARENT 2:** \_\_\_\_\_  
TITLE FIRST NAME LAST NAME  
Address \_\_\_\_\_  
(IF DIFFERENT THAN ABOVE) STREET CITY STATE ZIP COUNTRY  
Home phone \_\_\_\_\_ Business phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
Email (required) \_\_\_\_\_

**PRESENT SCHOOL** \_\_\_\_\_  
School address \_\_\_\_\_  
STREET CITY STATE ZIP COUNTRY  
School phone \_\_\_\_\_ School Fax \_\_\_\_\_  
Guidance Counselor, Principal, or Head of School \_\_\_\_\_  
School you will attend next fall \_\_\_\_\_  
(IF DIFFERENT FROM ABOVE) School phone \_\_\_\_\_

### HOW DID YOU HEAR ABOUT THE SUMMER SCHOOL?

Friend  Family member  Guidance Counselor/Teacher  Social Media  Taft Admissions Office  Taft Website  
 Educational Consultant \_\_\_\_\_  Publication \_\_\_\_\_  Other \_\_\_\_\_  
(PLEASE SPECIFY)  
Name of any relatives who have attended The Taft School or The Taft Summer School \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# A Application

PROGRAM TO WHICH YOU ARE APPLYING:

## 5 Weeks: June 27–July 31, 2020

**YOUNG SCHOLARS** (entering grades 7–8, applicants must be 12 years of age by June 1, 2020)

**LIBERAL STUDIES** (entering grades 9–12)

Boarding

prefer a single (depending on availability)

prefer a roommate (list special interests below)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Day

**Course Selection:** Each Young Scholar or Liberal Studies student takes two 100-level (major) and two 200-level (elective) courses. Because of the possibility of a course being filled, please list three choices in order of preference.

100-Level Courses:

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

200-Level Courses:

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

## 2 Weeks: July 12–24, 2020

**WRITER'S LAB** (entering grades 9–12, U.S. residents only)

prefer a single room (depending on availability)

prefer a roommate (list special interests below)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Course Selection:** Students enrolled in the Writer's Lab will be automatically pre-registered in a morning and afternoon writing class.

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

**THE \$75 NONREFUNDABLE APPLICATION FEE IS PAYABLE BY CHECK OR CREDIT CARD.**

Please make check payable to *Taft Summer School* or enter your credit card information below.

Please charge my:  Visa  MC

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ V-Code \_\_\_\_\_

Card Holder \_\_\_\_\_

**SUBMIT THE COMPLETED FORM TO:**

Summer School Admissions  
The Taft School  
110 Woodbury Road  
Watertown, CT 06795

Email: taftschooll.leapfile.net  
(secure file delivery)  
Fax: 860-945-7859







# C Teachers Report 1

40

---

---

---

---

---

---

---

---

---

---

PLEASE RATE STUDENT BY CHECKING THE APPROPRIATE BOXES BELOW:

	Excellent	Good	Fair	Poor
1. Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Peer interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Response to constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Overall evaluation as a student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In what subject do you teach the applicant? \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Teacher's Name \_\_\_\_\_

Position \_\_\_\_\_

School Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

School Address \_\_\_\_\_  
STREET CITY STATE ZIP COUNTRY

Teachers' Signature \_\_\_\_\_ Date \_\_\_\_\_

Applications are reviewed as they are received; therefore, we request your prompt attention to this recommendation. We cannot decide on the student's application until all forms have been received; late applications could jeopardize a student's chances for admission. Thank you for your help in evaluating this student.

**SUBMIT THE COMPLETED FORM TO:**

Summer School Admissions  
The Taft School  
110 Woodbury Road  
Watertown, CT 06795

Email: taftschool.leapfile.net (secure file delivery)  
Fax: 860-945-7859





# Teachers Report 2

42

---

---

---

---

---

---

---

---

---

---

PLEASE RATE STUDENT BY CHECKING THE APPROPRIATE BOXES BELOW:

	Excellent	Good	Fair	Poor
1. Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Peer interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Response to constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Overall evaluation as a student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In what subject do you teach the applicant? \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Teacher's Name \_\_\_\_\_

Position \_\_\_\_\_

School Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

School Address \_\_\_\_\_  
STREET CITY STATE ZIP COUNTRY

Teachers' Signature \_\_\_\_\_ Date \_\_\_\_\_

Applications are reviewed as they are received; therefore, we request your prompt attention to this recommendation. We cannot decide on the student's application until all forms have been received; late applications could jeopardize a student's chances for admission. Thank you for your help in evaluating this student.

**SUBMIT THE COMPLETED FORM TO:**

Summer School Admissions  
The Taft School  
110 Woodbury Road  
Watertown, CT 06795

Email: taftschool.leapfile.net (secure file delivery)  
Fax: 860-945-7859