



Applying to



The
Windward
School



Welcome from the Admissions Office

The Admissions Office is pleased to welcome you to The Windward School! Windward is a coeducational, independent day school dedicated to providing a proven instructional program for children with language-based learning disabilities. Our team is committed to working with you through the admissions process and is available to provide you with any support you may need. Please do not hesitate to contact us with any questions or concerns. You can also visit our website at www.thewindwardschool.org.

Sincerely,

ToniAnn Hutchison
Director of Admissions

Tristes Dunn
Assistant Director of Admissions

Robin McDonough
Coordinator of Admissions,
Westchester Campuses

Carly Lillo
Coordinator of Admissions,
Manhattan Campus

Contact the Admissions Team

Joan Barrett
Administrative Assistant, Westchester Lower & Middle Schools
Phone: (914) 949-6968, ext. 2221 • Email: jbarrett@thewindwardschool.org

Beckham Lindon
Administrative Assistant, Manhattan Lower & Middle Schools
Phone: (212) 222-8628, ext. 3149 • Email: blindon@thewindwardschool.org

Christine Ortiz
Administrative Assistant, Westchester Lower & Middle Schools
Phone: (914) 949-6968, ext. 2258 • Email: cortiz@thewindwardschool.org



Westchester Lower School



Westchester Middle School



Manhattan Lower & Middle Schools

Admissions Procedure

A: Criteria for Admission

1. Written diagnosis of a language-based learning disability
2. Average to superior intellectual potential
3. No behavioral or emotional problems that would interfere with the instructional program

Windward accepts applications throughout the year, regardless of spaces available.

B: Information Needed

The following information should be submitted to the Admissions Office.

1. An application for admission and a release form, allowing us to communicate with professionals
2. A completed psychoeducational evaluation including WISC V with scaled scores or a Stanford Binet, 5th edition (given within 2 years)
3. Recent school reports (from parent files or current school)
4. \$50 non-refundable fee for processing the application

C: Committee Review

After the application file is completed with all of the required information, it will be reviewed by the Admissions Committee.

1. Appropriate applicants are invited for an educational screening. There is a \$300 fee to screen each applicant.
2. The Admissions Committee reviews the data.
3. Findings and recommendations are discussed at a parent/guardian conference.

To Apply for Tuition Assistance

Tuition Assistance

The Windward School makes every effort to ensure that financial circumstances do not prevent students from enrolling. Therefore, the School offers tuition assistance to qualified applicants. Tuition assistance awards are determined based upon families' individual needs and the availability of funding.

Complete the TADS Form

The Windward School uses Tuition Aid Data Services (TADS), which assists independent schools in determining a family's financial need. To learn more about the financial aid process, please visit thewindwardschool.org/admissions.

Families can also call Dr. Erik Bennett, Director of Tuition Assistance, at (914) 949-6968, ext. 1271, with questions or to request the TADS Family Guide to Financial Aid.

Submit Documents

Send your two most recent IRS 1040 tax declarations, including all supporting schedules and accompanying W-2 statements for the present and past year.

The Windward School
Dr. Erik Bennett
Director of Tuition Assistance
40 West Red Oak Lane
White Plains, NY 10604
ebennett@thewindwardschool.org

Information Sessions and Tours

Parents are welcome to attend an Information Session at any time before or during the application process. To visit one of the Westchester campuses, please call Joan Barrett at (914) 949-6968, ext 2221. To visit the Manhattan campus, please call Beckham Lindon at (212) 222-8626, ext. 3149.

Student Information (To be completed by parent/guardian)

Student's Full Name

Preferred Nickname

Date of Birth

Current Grade

Address

City/State/Zip

PARENT/GUARDIAN

Mr. Mrs. Ms. Dr. Other

Name

Home Address *(if different than applicant)*

City/State/Zip

Home Telephone

Primary Cell Phone

Email

Occupation

Title

Employer

Business Address

Business Telephone

Education (check all that apply)

High School

College/Vocational

Graduate

PARENT/GUARDIAN

Mr. Mrs. Ms. Dr. Other

Name

Home Address *(if different than applicant)*

City/State/Zip

Home Telephone

Primary Cell Phone

Email

Occupation

Title

Employer

Business Address

Business Telephone

Education (check all that apply)

High School

College/Vocational

Graduate

If parents are separated or divorced, who has legal guardianship of the student?

CAMPUS CHOICE

I would like my child to attend the Manhattan campus.

I would like my child to attend the Westchester campus.

HOW DID YOU LEARN ABOUT THE WINDWARD SCHOOL?

Current Windward Parent (*name*)

Windward Alumnus/na (*name*)

Current School (*name*)

Word of Mouth

Website

Other (*specify*)

The following item is optional.

BACKGROUND OF STUDENT

Asian

Black or African American

Middle Eastern

Pacific Islander

Native American

Hispanic or Latino

White

Multiracial (*specify*)

Other (*specify*)

THE WINDWARD SCHOOL NONDISCRIMINATION POLICY

The Windward School does not discriminate in admissions, employment, or administration of programs on the basis of any category protected by applicable law.

Family Information

Please list the name, age, and schools of student's siblings.

Name	Age	Present School	Previous School

Is this student adopted?	At what age?	Birth Place

Describe the student's relationship with each parent/guardian.

Describe the effects of the student's academic difficulties on their home life.

Have there been any traumatic events in the student's family life that might have an effect on their functioning?

HEALTH INFORMATION

Has the student been hospitalized? Please give dates and reasons.

Is there a relationship between the student's physical health and their learning difficulties?

What medication does the student currently take? For what reason?

Describe any current health problems.

Describe any physical handicap the student has that might limit their participation in the program at The Windward School.

School History Information (To be completed by parent/guardian)

What special services has the student received in school?

What special services has the student received outside of school?

Describe any discipline and/or behavioral problems the student has exhibited in school.

Has the student had excessive absences from school? If so, what were the circumstances?

Has the student been retained?

If so, which grade?

What are the student's academic strengths?

What are the student's academic weaknesses?

Does the student acknowledge their learning difficulties?

SCHOOL HISTORY

Please use the form below to give the student's school history.

School Year/Grade			Name and full address of school	Type of program
20	-20	Grade		

20	-20	Grade		
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20	-20	Grade		
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20	-20	Grade		
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20	-20	Grade		
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EMOTIONAL AND SOCIAL DEVELOPMENT

Comment on the student's self-esteem and self-confidence.

Does the student make friends easily? Are friendships maintained?

Do you feel the student's social and emotional development has been influenced by their learning difficulties? Please explain.

How does the student respond to authority figures?

What extracurricular activities or hobbies does the student enjoy?

What psychological or psychiatric counseling, if any, has the student received? (Please note dates and names of therapist.)

Sources of Additional Information

List all professionals who have evaluated or worked with the student. Include field of expertise, dates, and telephone number.

How do you expect The Windward School to help your child?

Name of person preparing this application

Signature

Date

Please return this completed application, with a non-refundable application fee of \$50 to:

The Windward School
Admissions Office - Westchester Campuses
13 Windward Avenue
White Plains, NY 10605

The Windward School
Admissions Office - Manhattan Campus
212 East 93rd Street
New York, NY 10128

If a screening is scheduled, there will be an additional \$300 fee.

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Release of Information

To the Parent/Guardian:

Please complete this form and return it with your application. List all professionals who would be able to provide us with relevant information, including the child's current or most recent teacher. It is understood that the information is requested for professional use and will remain confidential.

I hereby give The Windward School permission to request information regarding my child:

Name of Student _____ from the following professionals.

Name	Position	Telephone	Email
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of person preparing this application _____

Signature _____ Date _____

Please return this completed form, with your application, to:

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Admissions Office - Manhattan Campus
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