



the salisbury school

Application for Admission for International Student

*To be completed by the parent/guardian and submitted to the Admissions Office.
A nonrefundable application fee of \$200.00 must be submitted with each application. Checks should be made payable to The Salisbury School.*

APPLICANT INFORMATION

Date application submitted: _____

NAME _____
Last First Middle Prefers to be called

Date of Birth _____ Gender: _____ Female _____ Male

Citizen of _____ First Language _____ Languages spoken at home _____

HOME ADDRESS _____

City State Zip

Home Telephone Email Cell Phone

Present Grade _____ Applicant for admission to the _____ (grade)

Year of proposed entry _____ Age (on September 1st of proposed entrance) _____

Has the applicant applied to The Salisbury School previously? If so, when? _____

What grades, if any, have been skipped or repeated? _____

Present School _____ Present Grade _____

School Address _____

School Phone () _____ Headmaster / Principal _____

___ Public ___ Private ___ Parochial Number of years attending _____

FORMER SCHOOLS List in order, most recent first:

Dates Attended School Name Address

Dates Attended School Name Address

FAMILY INFORMATION

FATHER'S FULL NAME:

(Dr./Mr.) _____ Home Telephone (_____) _____

Home Address (if different than applicant) _____

Occupation / Title _____ Business Phone (_____) _____

Employer _____ Email _____

Business Address _____

College and Degrees _____

MOTHER'S FULL NAME:

(Dr./Mrs. Ms.) _____ Home Telephone (_____) _____

Home Address (if different than applicant) _____

Occupation / Title _____ Business Phone (_____) _____

Employer _____ Email _____

Business Address _____

College and Degrees _____

Parents are: Married Divorced Separated Single Parent Mother Deceased
 Father Deceased Mother Remarried Father Remarried

Applicant lives with: Mother Father Both

If parents are not living together, to whom should correspondence be sent: Mother Father Both

If you anticipate requesting financial aid, please check. A financial aid package will be sent to you.

We agree to support and abide by the School regulations and guidelines not only at the time of admission, but also throughout subsequent years of attendance. All enrollments are for the entire school year. I/We authorize The Salisbury School to contact current and previous schools and other sources to obtain information to support this application. I/We will not seek access to confidential recommendations and evaluation materials before or after the admissions decision is made.

Signature of Parents / Guardians

Date

SCREENING AND/OR VISIT DATE: The Admissions Office will assign dates after receipt of application

Dates unable to attend: _____

SPECIAL CIRCUMSTANCES:

To better understand your child during the application process, has your child been diagnosed with any physical, medical, emotional, psychological learning needs, or disabilities? If yes, please explain:

Has the applicant ever been subject to disciplinary action, suspension, or dismissal from the previous school(s)?
___ yes ___no

Explanation: _____

Failure to answer the previous two questions honestly may jeopardize your child's admission.

Have you read The Salisbury School Philosophy? _____

Does the philosophy agree with your personal values? _____

The following criteria will be considered during the admission process. Overall factors, regardless of grade level, are as follows:

- The student's ability to enhance the school community with his/her presence
- The student's ability to flourish in The Salisbury School's rigorous educational environment
- Social and behavioral maturity
- Admissions interview, classroom visit, and admissions test
- School records, test scores, and recommendations

During the admissions process, we look forward to learning more about you and your child. Your answers to the questions below will help us appreciate your family as a whole and as distinct individuals. Feel free to share with us any other information you would like us to know. Be as brief or as lengthy as you like and use the reverse side of this sheet if needed.

What are the important aspects of your child's life that you want us to know about (family, culture, ethnicity, strong interests, etc)?

What do you consider to be your child's academic strengths? _____

Personal strengths? _____

What do you consider to be your child's academic weaknesses? _____

Personal weaknesses? _____

What do you find to be the most challenging aspects of your child? _____

What do you find to be the most rewarding aspects of your child? _____

How would you describe your relationship with your child? _____

In what clubs, teams, or other group activities is your child involved, and to what extent? _____

Why do you think The Salisbury School might be a good fit for your child? _____

How would you summarize your expectations of The Salisbury School for your child? _____

NOTE: NO CHILD IS ACCEPTED WITHOUT A PERSONAL INTERVIEW AND SCREENING.
Admission is based on the completed application, individual testing, applicant's visit to the school, and the review of recommendations and scholastic records by the Admissions Committee.

The Salisbury School admits students of any race, color, religion, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, religion, age, sex, national or ethnic origin in administration of its educational policies, admissions and employment policies, scholarship programs, and athletic or other school administered programs.

Signed: _____