

Pingree

2024 – 2025 Application

APPLICANT'S CHECKLIST

- FAMILY VISIT: Pingree's application process requires a family visit which includes a tour and interview for you and your parents/guardians. There are two ways to schedule a visit. Call Admission Office Coordinator Kate Frost at 978.468.4415, ext. 262 or you may request an interview time through your online admission portal.
- STANDARDIZED TESTS: Pingree will be test optional for the 2024-2025 application process. If you wish to submit test scores, Pingree accepts the SSAT and the ISEE.
- RECOMMENDATIONS: Share the English and Math Recommendation forms to the appropriate teachers at your school. All materials must be submitted to Pingree by January 15, 2025.
- TRANSCRIPT: Share the Transcript Release form to your school registrar or guidance counselor. Be sure to have a parent or guardian sign the form. All materials must be submitted to Pingree by January 15, 2025.
- APPLICATION: Complete the forms and essays. Enclose a non-refundable application fee of \$60 for domestic applications and \$120 for international applications. Make check payable to Pingree School.

LET US HELP YOU WITH THE PROCESS.

Call the Admission Office at 978.468.4415, x262 with any questions.

APPLICATION IS DUE JANUARY 15, 2025 for admission for the 2025-2026 school year.

2024-2024 Application



PARENT QUESTIONNAIRE

Candidate Information

FIRST NAME	MIDDLE	LAST	P	REFERRED NAME OR NICKNAME
DATE OF BIRTH	AGE			
STUDENT MAILING ADDRESS				
STUDENT TELEPHONE NUMBER				
STUDENT EMAIL		PARENT 1 EMAIL		PARENT 2 EMAIL
STUDENT'S PRESENT SCHOOL			SCHOOL TELEPHONE	
SCHOOL ADDRESS				
PRINCIPAL OR HEADMASTER			PLACEMENT / GUIDAN	ICE COUNSELOR
School Type Charter 🔵 Hon	neschool 🔹 Public 🔵	Parochial/Religious	Independent/Private 🔵	
Application for admission to grade	9 10 11 12	Entering September 20	Current grade	Sex m • f • non-binary •

Family Information

PARENT / GUARD	IAN 1		PARENT / GUARDIAN 2				
	RELATION TO STUDEN	ΙT) STUDENT			
FIRST	MIDDLE	LAST	FIRST	MIDDLE	LAST		
HOME ADDRESS			HOME ADDRESS				
CITY	STATE	ZIP	CITY	ST	ATE ZIP		
HOME TELEPHON	NE MOBILE PH	ONE	HOME TELEPHON	IE MC	DBILE PHONE		
OCCUPATION OR	TITLE		OCCUPATION OR	TITLE			
NAME OF EMPLO	YER		NAME OF EMPLO	YER			
BUSINESS ADDRE	SS		BUSINESS ADDRE	SS			
BUSINESS TELEPH	HONE		BUSINESS TELEPH	IONE			
Candidate lives	with (check all that apply) Father 🔵	Mother 🔵 Step	father 🔵 Stepmo	other 🔍 Other			
Father deceased	Mother deceased Parents	separated 🔵 Pa	rents divorced 🔵				
Name of person	n financially responsible						
Address (if diffe	rent)						
Please check all	l applicable boxes:						
African Amer	rican/African/Black 🛛 Asian (country) 🔍 Caucasia	n 🔍 Latino/Hispanic (countr	у		
Middle Easte	ern 🔍 Native American 🔍 Mexican An	nerican/Chicano	Puerto Rican 🔍	Native Hawaiian/Pacific Islande	er 🔍 Other		
Enclose a	non-refundable application fea				tional applications.		
	Make check payat	le to Pingree	School. Applicat	tion is due January 15.			

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PARENT QUESTIONNAIRE CONTINUED

		and sister of south the	
ease list names, a	ages and current schools of all brothers a	and sisters of candidate.	
AME		AGE	SCHOOL
lease list anv relat	ives of the candidate who have attended	Pingree.	
AME	RELATIONSHIP	GRADUATING	CLASS (IF KNOWN)
Has your child eve	er skipped or repeated a grade? If so, plea	ase explain.	
s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
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s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
s your child's reco	rd an accurate reflection of their talent a	nd potential? If not, why?	
	rd an accurate reflection of their talent a e any further comments you might wish t		

Pingree School admits students of any race, color, religion, sex and national and 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, sex or national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, or athletic administered programs.

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STUDENT QUESTIONNAIRE

PLEASE ATTACH PHOTOGRAPH HERE This is optional and has no influence on the selection process at Pingree School. The picture simply serves as a reminder of the person behind the application.

Have you attended any schools other than your p	present one in the past three years? If so, which one	25?
Describe your participation in school activities (s	school offices, clubs, etc.). Attach an activity sheet	if you wich
	school onices, clubs, etc.j. Attach an activity sheet	
List the sports you have participated in, both in a	and out of school within the last three years:	
SPORT	TEAM/LEVEL	DATES OF PARTICIPATION
List the visual and performing arts you have part		t three years.
	DATES OF PARTICIPATION	
	· ·	
Describe your participation in any other activities	s outside of school (camps, jobs, travel, etc.).	

Describe your participation in community service.

List any awards or honors you have received in the past three years.

What makes you the interesting person that you are? (Be sure to include the qualities you like best about yourself.)

What subject in school is of greatest interest to you? Why?

Tell us about your family.

What else would you like us to know about you?

I hereby agree that the information included in this application is true and complete. Also, the information in the student questionnaire is my own work and has been completed by me. I understand that all admission materials are to remain confidential. The director of admission may, however, disclose information for official purposes only. I hereby apply for admission to Pingree School.

SIGNATURE OF CANDIDATE

Pingree School Application

STUDENT QUESTIONNAIRE



STUDENT ESSAY

Choose one of the following topics (250 words or more). You may hand write or attach your response to the essay question.

1. Describe an unforgettable moment in your life.

2. Describe a person you admire or who has influenced you a great deal.

STUDENT RESPONSE

Please offer your thoughts on the following statement (100 words or less). You may hand write or attach your response to the essay question.

Pingree believes that a love of learning flourishes best in a diverse community that honors the identities of all students. Tell us why you would like to learn in a school that embraces diversity, inclusion, and anti-racism.

STUDENT ESSAY CONTINUED



ENGLISH TEACHER RECOMMENDATION

STUDENT Please type or print your name in the space below and then give this form to your <u>current</u> English teacher with a stamped envelope. TEACHER Please return by January 15 to: 537 HIGHLAND STREET, SOUTH HAMILTON, MASSACHUSETTS 01982-1399 or scan and email to applicationmaterials@pingree.org. This recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please photocopy it and send it to Pingree School in the stamped envelope provided by the student. Thank you for your cooperation and candor.

NAME OF STUDENT

NAME OF TEACHER

SCHOOL ADDRESS

HOW LONG HAVE YOU KNOWN THE STUDENT?

WHAT WORDS WOULD YOU USE TO DESCRIBE THIS STUDENT?

Please list the courses you have taught this student and the level of course difficulty (accelerated, honors, regular, etc.), beginning with the most recent.

SCHOOL

Discuss this student's performance in relation to their ability.

Evaluate the applicant in the following areas:		BELOW GRADE LEVEL	GRADE LEVEL	ABOVE GRADE LEVEL
VOCABULARY	Oral and Written	•	•	•
READING	Speed and Fluency	•	•	•
	Comprehension	•	•	•
	Ability to move from literal to figurative	•	•	•
	interpretations			
WRITING	Mechanics	•	•	•
	Sentence Structure and Variety	•	•	•
	Clarity and Organization of Ideas	•	•	•

Describe this student's class participation and working relationship with other students and with adults.

What are the student's strengths, both as a student and a community member?

In what areas should this student focus on continuing to develop?

Is there a problem with conduct, tardiness or absence? If so, please explain.

Please place check marks at the points that represent your evaluation of the student in comparison to other students in this age group whom you have taught or advised. If you have no fair basis for judgement, do not hesitate to say so.

	ONE OF THE TOP FEW I HAVE EVER ENCOUNTERED	EXCELLENT (TOP 10% THIS YEAR)	GOOD (ABOVE AVERAGE)	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGEMENT
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

Does this student receive any accommodation in the classroom? If yes, please explain.

To your knowledge, is the parents' perception of their child compatible with the school's understanding of the child?

Is there any other information that you would like to provide us to help us get to know this student?

TEACHER SIGNATURE

DAYTIME PHONE

EMAIL

Thank you for taking the time to complete this evaluation.

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-	STUDENT Please type or print your name in the space below and then give this form to your current math teacher with a stamped envelope. TEACHER Please return by January 15 to: 537 HIGHLAND STREET, SOUTH HAMILTON, MASSACHUSETTS 01982-1399 or scan and email to applicationmaterials@pingree.org. This recommendation will remain confidential and will not become part of the student's permanent record. When you have completed it, please photocopy it and send it to Pingree School in the stamped envelope provided by the student. Thank you for your cooperation and candor.
	NAME OF STUDENT
	NAME OF TEACHER SCHOOL
	SCHOOL ADDRESS
	EMAIL ADDRESS DAYTIME PHONE
	HOW LONG HAVE YOU KNOWN THE STUDENT?
	WHAT WORDS WOULD YOU USE TO DESCRIBE THIS STUDENT?
	Please list the courses you have taught this student and the level of course difficulty (accelerated, honors, regular, etc.), beginning with the most recent.
	LIST TEXT(S) USED IN THIS COURSE AND THE CHAPTERS YOU EXPECT TO COVER BY THE END OF THE YEAR
	What are the student's strengths both as a student and a community member?
	What is the one thing this student should focus on to continue developing as a student of mathematics?
	Do you feel that the student's perception of their own ability and progress in mathematics is in line with your own? If not, please briefly describe the situation.

Please place check marks at the points that represent your evaluation of the student in comparison to other students in this age group whom you have taught or advised. If you have no fair basis for judgement, do not hesitate to say so.

	ONE OF THE TOP FEW I HAVE EVER ENCOUNTERED	EXCELLENT (TOP 10% THIS YEAR)	GOOD (ABOVE AVERAGE)	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGEMENT
Academic Potential						
Academic Achievement						
Intellectual Curiosity						
Effort/Determination						
Ability to Work Independently						
Organization						
Creativity						
Willingness to Take Intellectual Risks						
Concern for Others						
Honesty/Integrity						
Self-esteem						
Maturity (relative to age)						
Responsibility						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Emotional Stability						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

Does this student receive any accommodations in the classroom? If yes, please explain.

Is there any other information that you would like to provide us to help us get to know this student?

TEACHER SIGNATURE

Thank you for taking the time to complete this evaluation.

DAYTIME PHONE

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OPTIONAL STUDENT EVALUATION

CANDIDATE Please type or print your name in the space provided and then give this form to your evaluator with a stamped envelope. This is an optional recommendation form for you to give to an additional person in your school or community who knows you well.

RECOMMENDER Please return by January 15 to: 537 HIGHLAND STREET, SOUTH HAMILTON, MASSACHUSETTS 01982-1399 or scan and email to applicationmaterials@pingree.org

NAME OF STUDENT

TO THE RECOMMENDER Would you please write a brief evaluation of the candidate named above. Insight you can provide about the candidate's character, interests, curiosity, motivation, integrity, and ability in the area(s) which you know the candidate best will be helpful for the Admission Committee. This recommendation will remain confidential and will not become part of the student's permanent record. Please return by January 15. Thank you for your cooperation and candor.

SIGNED	DATE	EMAIL
RECOMMENDER'S NAME (PRINTED) AND POSITION		
SCHOOL / ORGANIZATION		
ADDRESS		ZIP



STUDENT Please note that all transcripts and standardized test scores are due no later than January 15. Please submit this completed form to your current school.

SCHOOL / GRADE

Pingree

The above student is a candidate for admission to Pingree School. The following information is requested to enable our admission committee to make a careful and fair decision. Please complete the form and attach an official transcript, which should, if possible, include last year's grades, as well as those from at least one marking period of the current academic year. In addition, please include the dates and results of any standardized aptitude and/or achievement tests taken by the candidate.

PARENT AUTHORIZATION

AS PARENT / GUARDIAN OF

I hereby authorize the release of any and all records of and information about this applicant to Pingree School.

PARENT / GUARDIAN SIGNATURE

DATE

NAME

REGISTRAR Please attach official transcripts including most recent grades and records. Please mail these documents directly to Pingree School using the address listed below or email these documents to Kate Frost, assistant director of admission services, at kfrost@pingree.org. Thank you for your assistance.

Please Return to: Office of Admission Pingree School 537 Highland Street South Hamilton, Massachusetts 01982-1399