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.

- STANDARDIZED TESTS: Pingree will be test optional for the 2026-2027 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, 2026.

- 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, 2026.

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, 2027 for admission for the 2027-2028 school year.

Pingree

PARENT QUESTIONNAIRE

Candidate Information

FIRST NAME | MIDDLE | LAST | PREFERRED 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 / GUIDANCE COUNSELOR

School Type Charter ○ Homeschool ○ 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 / GUARDIAN 1 _____ RELATION TO STUDENT

FIRST | MIDDLE | LAST

HOME ADDRESS

CITY | STATE | ZIP

HOME TELEPHONE | MOBILE PHONE

OCCUPATION OR TITLE

NAME OF EMPLOYER

BUSINESS ADDRESS

BUSINESS TELEPHONE

PARENT / GUARDIAN 2 _____ RELATION TO STUDENT

FIRST | MIDDLE | LAST

HOME ADDRESS

CITY | STATE | ZIP

HOME TELEPHONE | MOBILE PHONE

OCCUPATION OR TITLE

NAME OF EMPLOYER

BUSINESS ADDRESS

BUSINESS TELEPHONE

Candidate lives with (check all that apply) Father ○ Mother ○ Stepfather ○ Stepmother ○ Other _____

Father deceased ○ Mother deceased ○ Parents separated ○ Parents divorced ○

Name of person financially responsible _____

Address (if different)

Please check all applicable boxes:

○ African American/African/Black ○ Asian (country_____) ○ Caucasian ○ Latino/Hispanic (country_____)

○ Middle Eastern ○ Native American ○ Mexican American/Chicano ○ Puerto Rican ○ Native Hawaiian/Pacific Islander ○ Other _____

Enclose a non-refundable application fee of $60 for domestic applications and $120 for international applications. Make check payable to Pingree School. Application is due January 15.

Family Information

Please list names, ages and current schools of all brothers and sisters of candidate.

NAME	AGE	SCHOOL

Please list any relatives of the candidate who have attended Pingree.

NAME	RELATIONSHIP	GRADUATING	CLASS (IF KNOWN)

Has your child ever skipped or repeated a grade? If so, please explain.

Is your child's record an accurate reflection of their talent and potential? If not, why?

We would welcome any further comments you might wish to offer concerning your child.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE OF APPLICATION _____

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.

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 present one in the past three years? If so, which ones?

Describe your participation in school activities (school offices, clubs, etc.). Attach an activity sheet if you wish.

List the sports you have participated in, both in and out of school within the last three years:

SPORT	TEAM/LEVEL	DATES OF PARTICIPATION

List the visual and performing arts you have participated in, both in and out of school within the last three years:

ACTIVITY	DATES OF PARTICIPATION

Describe your participation in any other activities 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 DATE

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.

Pingree

ENGLISH TEACHER RECOMMENDATION

STUDENT Please type or print your name in the space below and then give this form to your **current** 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

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.

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						

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.

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						

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

TEACHER SIGNATURE

DAYTIME PHONE

Thank you for taking the time to complete this 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.

NAME SCHOOL / GRADE

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

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