



PARENT APPLICATION FOR ADMISSION

(This form is required for applicants to Transitional Kindergarten (TK). Applicants to TK must have turned four prior to August 1 of the year they wish to enter Viewpoint)

Application Fee of \$125 must be submitted with completed application.

APPLICANT:

Applying for admission to Grade _____ starting in the fall of _____ year

Full legal name of applicant _____
first middle last

Preferred name _____

Applicant's Date of Birth _____ Age _____ Gender _____
month / day / year

Place of Birth _____ Country of Citizenship* _____

*If not a U.S. Citizen, please note that F1 visas are not available for applicants to Transitional Kindergarten.

Are you applying your child to repeat this grade? ☐ No ☐ Yes

PARENT INFORMATION:

PRIMARY HOUSEHOLD

Parent or Guardian 1: Title, First Name, Last Name

Cell Phone Email

Relationship to Applicant

Occupation Title

Company/Organization Work Phone

College(s) Attended

Secondary School Attended

Parent, Stepparent, or Guardian 2: Title, First Name, Last Name

Cell Phone Email

Relationship to Applicant

Occupation Title

Company/Organization Work Phone

College(s) Attended

Secondary School Attended

Home Address of the Primary Household City State Zip Code Country (if not U.S.) Home Phone

SECONDARY HOUSEHOLD (IF ANY)

Parent or Guardian 1: Title, First Name, Last Name

Cell Phone Email

Relationship to Applicant

Occupation Title

Company/Organization Work Phone

College(s) Attended

Secondary School Attended

Parent, Stepparent, or Guardian 2: Title, First Name, Last Name

Cell Phone Email

Relationship to Applicant

Occupation Title

Company/Organization Work Phone

College(s) Attended

Secondary School Attended

Home Address of the Secondary Household City State Zip Code Country (if not U.S.) Home Phone

Family Status

☐ Parents Together ☐ Parents Divorced ☐ Parents Separated ☐ Only Has One Parent
☐ Mother Remarried ☐ Father Remarried ☐ Mother Deceased ☐ Father Deceased

With whom does the child reside? _____ Who is the responsible financial party? _____

To whom should correspondence be sent? ☐ Both ☐ Mother only ☐ Father only ☐ Other

SIBLINGS OF APPLICANT:

Name	Date of Birth	Current Grade	Is sibling currently enrolled at Viewpoint?	Present School
			☐ Yes ☐ No	
			☐ Yes ☐ No	
			☐ Yes ☐ No	

RELATIVES OF THE APPLICANT WHO HAVE ATTENDED VIEWPOINT SCHOOL:

Name	Relationship	Years Attended

SCHOOL INFORMATION:

Does your child currently attend preschool? ☐ Yes ☐ No

If so, what is the frequency of their attendance? (days per week/hours per day) _____

Current School Name	Grade Level	Dates Attended

REFERRAL:

I/We have been referred to Viewpoint by: _____

If more space is necessary in answering the following questions, please send additional responses to admission@viewpoint.org.

Please tell us why you are interested in applying your child to Viewpoint School. What are the priorities (academic, extracurricular, and/or social-emotional) that your family has identified for a school environment for your child? What will be important to nurture?

What three words come to mind when you think about your child? Feel free to share an anecdote that illustrates this.

Tell us about any experiences your child has had in a classroom/organized play setting. How often do they attend?

What are your child's favorite activities? Please include informal activities and any favorite organized activities.

Very young children react to new settings and situations in a variety of ways, from tentative to enthusiastic. We want your child to feel as comfortable as possible in this process. Tell us a little about your child's temperament in new settings and situations.

Our mission at Viewpoint is to create exceptional readiness for extraordinary futures by cultivating the critical skillset, courageous mindset, and resilient identity of each individual Viewpoint student. The values by which we live this mission are love, honor, excellence, imagination, and optimism. Tell us a brief anecdote about your child that you think speaks to one or more of these values.

How do you see your role in your child's education?

At Viewpoint, parents are valued community members, actively engaging through volunteerism and philanthropy. Please tell us about your involvement in the life of your child's current or previous school, and any other volunteer, support, or philanthropic activities in which you may have engaged.

FINANCIAL AID:

At this time, financial assistance is not available for the TK program. Families may wish to refer to the Tuition page of Viewpoint's website for program cost. www.viewpoint.org/admission/tuition

RACE or ETHNICITY: (Optional)

If you'd like to share information about what racial or ethnic groups describe you, feel free to respond below. This is not required.

☐ Asian ☐ Black/African American ☐ Latino/a/Hispanic ☐ Middle Eastern ☐ Native Hawaiian/Other Pacific Islander
☐ Native American ☐ White ☐ Other _____

SIGNATURE:

We (I) certify that the information provided on this application is true and accurate. We (I) understand and agree that all evaluations and recommendation forms are confidential and will not be disclosed to me or become part of my child's permanent file.

Parent's or Legal Guardian's Signature

Parent's or Legal Guardian's Signature

Date

Date

Viewpoint School is committed to enrolling a diverse student body. The School admits students of any race, color, gender, sexual orientation, religion, or national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the School. The School does not discriminate on the basis of race, color, gender, sexual orientation, religion, or national or ethnic origin in the administration of its educational policies, admission and tuition assistance policies, and athletic, or other school-administered programs.