



GROTON SCHOOL

282 Farmers Row, P.O. Box 991, Groton, Massachusetts 01450
Telephone (978) 4-7510 E-mail: admission@groton.org

Parent/Guardian Statement

Submission by January 15

Student's name _____
Last First Middle

We are pleased that your child is applying for admission to Groton School. We strive to work closely with parents. Please answer the following questions with insights that will help us get to know your child well.

What qualities of your child's character and mind most delight you?

Please share impressions of how your child works with a variety of different people-- peers, mentors, and even new acquaintances.

What has led your family to submit an application to Groton?

Is there anything about the sequence of your child's schooling that we should know? Did your child ever skip or repeat a year? Was your child ever asked to withdraw from a school, suspended or put on probation? Please explain.

If your contact information has changed since we received your Candidate Profile, please contact the admission office at admission@groton.org.

Signatures

We appreciate your time in completing this form. The deadline for applying to Groton is January 15.

We authorize Groton School to request, and our child's school(s) to provide, a complete academic transcript, disciplinary record, and any other information requested to make an informed admission decision.

Parent's Signature Date

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