



Welsh Hills School

Student Application Form

Today's Date: _____

School year: _____

Student Information

Student's Legal Name: _____ Preferred Name: _____

Address: _____

Birth Date: _____ Age: _____ Gender: _____

Program: Children's House (3yrs - K) desired schedule _____

Family/Guardian Information

Name: _____

Parent Guardian Other

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

E-mail address: _____

Occupation: _____

Employer: _____

Names and birth dates of student's siblings:

Relatives attending Welsh Hills School now or in the past:



Welsh Hills School

Student Name _____

Statement of Custody

Student lives with: (check all that apply)

Mother Father Stepmother Stepfather Grandparents Foster Parents Guardian Shared Custody

Other (please explain): _____

I state that I have : Full custody rights Shared custody rights

Please indicate below the appropriate selection for your custody statement:

- Parents / guardians reside together.
- The father/mother of my child is deceased.
- Parents are separated and no custody order currently exists.
- I have court documentation for custody. (A copy of the court order is required for the student's file.)

Citizenship/ Ethnicity

Citizenship status: US Citizen Other (country) _____

Is English the student's primary language? Yes No

If no, please state the primary language: _____

Please indicate the best description of your child's cultural background. This information will be used solely for reporting purposes as required of educational institutions by federal law. Your participation is voluntary.

- Native American
- Hispanic/Latino
- African American
- Caucasian
- Asian American
- Middle Eastern
- Multi-racial
- Other: _____

Welsh Hills School does not discriminate in recruitment, admissions, employment, or other matters on the basis of race, ethnicity, color, age, gender, religion, sexual identity, disability, national origin, or socio-economic status. Decisions will be based on the availability of openings and other relevant information.



Welsh Hills School

Student Name _____

Educational Information

Is your student eligible for (or has received) Special Education services? Yes No

If yes, please check all that apply:

Gifted Occupational Therapy Physical Therapy Speech Therapy Reading Intervention

Does your child have a current 504 Plan? Yes No

Does your child have a current Individualized Education Plan (IEP)? Yes No

Has your child participated in the Help Me Grow program? Yes No

A copy of the 504 Plan or IEP will be required for the student's file.

Was your child born prematurely? _____ If yes, how early? _____

Please indicate the approximate ages at which your child reached the following milestones:

Walked alone: _____ Spoke in sentences: _____ Toilet trained: _____ Dressed self: _____

Please list five words that best describe your child.

Please describe your child's learning style.

Please describe your educational goals for your child.

Please detail other information you feel is relevant to your child's experience and education at WHS.



Welsh Hills School

Student Name _____

Financial Information

Please indicate the person financially responsible for the student's tuition and fees:

Name: _____ Relationship to student: _____

Address: _____

Phone: _____ Email: _____

A \$35.00 Application Fee is due with this application.

Cash included. Check attached. (check number _____)

Financial Aid

Financial Assistance is available online at <https://factsmgmt.com>. Please check all that apply:

No financial aid necessary. I will apply for financial aid. I have applied for financial aid.

Total Financial Aid requested: _____

Maximum available contribution towards tuition and fees: _____

The Welsh Hills School budget for Financial Aid varies from year to year and is available on a limited basis. Returning students receive first priority, followed by siblings, and then new enrollees. Aid shall not exceed 50% of tuition. Financial Aid does not apply to fees. Admissions decisions are made independently from financial aid considerations.

Mission Statement

Welsh Hills School builds life-long learners, independent critical thinkers, creative problem solvers, and compassionate, responsible individuals who are respectful global citizens.

Vision Statement

Welsh Hills School provides a dynamic, global education that focuses on the whole child.

Values

Integrity, confidence, empathy, respect, curiosity, collaboration, self-awareness, initiative, grace, courtesy, community



Welsh Hills School

Student Name _____

Current School Information/ Release

I hereby authorize the designated representative of:

Student's current/former school

Address

Phone

Fax and/or email

To release any/all information on (student): _____

to Welsh Hills School for the purposes of admission.

Signature of parent or guardian: _____ Date: _____

Office Use Only

Tour date: _____

Application received: _____

Student visit: _____

Contract offered: _____

Deposit amount : _____

Financial Aid application submitted: _____

Records request sent: _____

Other: _____

Application fee: _____

Recommendations received: _____

Contract received: _____

Deposit received: _____

Financial Aid : _____

Records received: _____