



Application for Admission

Date of Application _____

My child is applying for:

☐ Immediate enrollment ☐ Fall enrollment ☐ Spring enrollment School year _____
☐ Grade 1 ☐ Grade 2 ☐ Grade 3 ☐ Grade 4
☐ Grade 5 ☐ Grade 6 ☐ Grade 7 ☐ Grade 8
☐ Early Childhood 5-day ☐ Kindergarten (five years old by June 1) ☐ Early Childhood 3-day ☐ Early Childhood 2-day
☐ I will need after-school care for my child. ☐ 12:30-3:00 (Early Childhood) ☐ 3:00-5:30

Family Information

Child's Full Name _____

Date of Birth _____ Gender _____ Preferred Name _____

Parent/Guardian _____ Relationship to child _____

Home address _____

City, State, Zip _____

Occupation _____ Employer _____

Home phone _____ Cell phone _____

Email _____ Business phone _____

Parent/Guardian _____ Relationship to child _____

Home address _____

(If different from above)

City, State, Zip _____

Occupation _____ Employer _____

Home Phone _____ Cell phone _____

Email _____ Business phone _____

Please check the applicable box:

☐ Parents Married ☐ Parents Divorced ☐ Single Parent ☐ Parents Separated ☐ Mother Deceased ☐ Father Deceased

If parents are separated or divorced, who has legal custody of the applicant? _____

Person(s) responsible for school financial obligations _____

If not living with both parents, with whom does the student primarily reside? _____

Please list the names of siblings and others living at home with your child:

Sibling's name	Age	School/College/Other	Grade
Sibling's name	Age	School/College/Other	Grade
Other's name	Relationship	Other's name	Relationship

Child's Current and Previous Education

Name of current school	City/State	Dates Attended	Current Grade
Subject enjoyed most	Subject enjoyed least		
Reasons for leaving			

Other Schools attended in the past three years:

Name	City/State	Dates Attended	Reasons for Leaving
Name	City/State	Dates Attended	Reasons for Leaving

Other Information

Child's Activities (hobbies, sports, other) _____

Artistic/Musical interests or talents _____

What language(s) is/are spoken/studied at home? _____

What role does media (TV, movies, videos, computer games, etc) play in your family life?

Please indicate the number of hours viewed daily and on weekends:

Television _____ on weekends _____

Movies/videos _____ on weekends _____

Computer/Video Games _____ on weekends _____

If age-appropriate alternatives were suggested, would you be willing to make changes in the way your child relates to media?

What do you consider your child's strongest aptitudes and traits of character?

What traits would you especially like to see strengthened?

Describe your child's indoor and outdoor play environments.

What kind of experience do you hope to have at Linden Waldorf School?

Share with us any other information you feel we should know about your child or your family situation. This information will be held in confidence.

Special Considerations:

Does your child have any physical, emotional, or academic issues that his/her teachers should be aware of? Please include allergies, learning issues, speech problems, developmental delays, etc. List any previous and current therapies. (This information is requested for the sole purpose of determining whether the school can provide the applicant with an appropriate education and will not be considered in determining whether he/she is otherwise qualified for admission.)

Please list any health considerations the school should know about, such as allergies, major illnesses, accidents, and current medications:

Linden Waldorf School Information

How did you become interested in Linden Waldorf School? (Check all that apply)

- | | |
|-----------------------------------------------|--------------------|
| <input type="checkbox"/> Current LWS Family | Name: _____ |
| <input type="checkbox"/> Other Waldorf School | Name: _____ |
| <input type="checkbox"/> Private School Fair | Location: _____ |
| <input type="checkbox"/> Internet | Site: _____ |
| <input type="checkbox"/> Word of Mouth | Specify: _____ |
| <input type="checkbox"/> Ad | Publication: _____ |
| <input type="checkbox"/> Elves' Faire | Year: _____ |
| <input type="checkbox"/> Other | Specify: _____ |

Have you attended an Open House or Visitor Morning at the school? _____

Have you read about Waldorf education and/or attended lectures or workshops? _____

If you are acquainted with alumni or families in our school, please list: _____

Tuition Assistance may be available for qualified families with students in K-8. Tuition Assistance is not available for Early Childhood students. Awards are based on need and the availability of funds. Please see our website under the admissions section to learn more about Tuition Assistance.

Linden Waldorf School is a strong community and parents are expected to join us in the adventure of education. If your child were to be admitted to the school, in what ways would you be interested in participating?

Linden Waldorf School does not discriminate on the basis of race, religion, sex, disability, national origin, or any other protected status in its admission policies or in the conduct of educational, athletic, or scholarship programs.

Signature of Parent/Guardian _____ Date _____

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Please enclose a non-refundable application fee of \$100 and a recent photograph of your child.

Please return application to:

Linden Waldorf School
Enrollment Coordinator
3201 Hillsboro Pike
Nashville, TN 37215