



on the ROARING FORK

## APPLICATION FOR ENROLLMENT

To be completed by parent or guardian.

A non-refundable application fee of \$50.00  
is required of each applicant.

First grade applicants must be six years old by  
June 1 of the year of entry.

### Applicant Information

Grade Applying for \_\_\_\_\_ for the year beginning fall \_\_\_\_\_

Name of Applicant \_\_\_\_\_  
First Middle Last Nickname if any

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Home phone \_\_\_\_\_

### Tuition Adjustment

If your child(ren) is/are being enrolled in grades 1- 8 or eligible for first grade the following year, you may apply for tuition adjustment after acceptance into the grades. A tuition adjustment packet may be obtained through the school's front office.

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Family Information

Father \_\_\_\_\_ Mother \_\_\_\_\_

Home Address \_\_\_\_\_ Home Address \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Name of Business \_\_\_\_\_ Name of Business \_\_\_\_\_

Email Address \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Telephone \_\_\_\_\_

Step-Father \_\_\_\_\_ Step-Mother \_\_\_\_\_

Email Address \_\_\_\_\_ Email Address \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Name of Business \_\_\_\_\_ Name of Business \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Telephone \_\_\_\_\_

Marital Status of Parents Together Separated Divorced  
Custody \_\_\_\_\_ Visitation rights \_\_\_\_\_

Father remarried Father deceased Mother remarried Mother deceased

Student lives with \_\_\_\_\_ Relationship \_\_\_\_\_

Tuition to be paid by whom? \_\_\_\_\_

Brothers and Sisters of Applicant

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Are you applying to the Waldorf School on the Roaring Fork for any of the above siblings? \_\_\_\_\_

If yes, which child(ren)? \_\_\_\_\_

Previous Schools

Please list applicant's previous schools starting with the current school.

\* Current School \_\_\_\_\_ Years attended \_\_\_\_\_ Grades attended \_\_\_\_\_

Address \_\_\_\_\_ Tele. \_\_\_\_\_

\* Previous School \_\_\_\_\_ Years attended \_\_\_\_\_ Grades attended \_\_\_\_\_

Address \_\_\_\_\_ Tele. \_\_\_\_\_

\* Previous School \_\_\_\_\_ Years attended \_\_\_\_\_ Grades attended \_\_\_\_\_

\* Previous School \_\_\_\_\_ Years attended \_\_\_\_\_ Grades attended \_\_\_\_\_

\* Previous School \_\_\_\_\_ Years attended \_\_\_\_\_ Grades attended \_\_\_\_\_

Please explain why you are interested in the Waldorf School on the Roaring Fork. Include materials you have read, lectures attended, and how you heard of the school. Are you acquainted with anyone at the school?

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Please describe any special circumstances that have affected or may have affected your child's school experience.

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Please describe your child's interests, musical instruments played, special talents, or hobbies.

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Has your child received, or is he or she now receiving special tutoring, counseling or therapy? \_\_\_\_

If yes, please explain (include the nature and dates of service - if necessary, attach a detailed explanation).

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Please identify any health situations the school should know about, such as diagnosis, allergies, therapies (physical or psychological), medications.

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Has your child ever studied a foreign language? If so, please specify.

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

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The Waldorf School on the Roaring Fork is a community school 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?

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