ENROLLMENT APPLICATION for admission to



CARPE DIEM PRIMARY

Applicant's Name

HARBOR SCHOOL | ^{PH} (206) 567-5955 | ^{EMAIL} admissions@harborschool.org | www.harborschool.org Mailing Address: PO Box 1912, Vashon, WA 98070 | Administrative Office: 15920 Vashon Hwy SW, Vashon, WA 98070

1 Harbor School & Carp	oe Diem Primary	Enrollment App	lication				
Applicant's Nan	ne						
 Last Name	Firs	t Name		Middle	Nickname	2	
	-						
Address			State	Zip	Pł	none	
Date of Birth/	_/ Ap	plying for Grad	de □K □1		4 □ 5 □ 6 □ 7	□ 8 Fall 20	DC
Applicant's Schoo	ol History (Pla	ease list all sch	ools previou	sly attended.)			
Current School				Years A	Attended		
Address				Schoo	l Phone		
Teacher/Counselor v	who best kno	ws the applic	ant				
Other School				Years A	Attended		
Other School				Years A	Attended		
Parent/Guardian I	nformation						
Parent/Guardian Na	me			Parent/Guardi	ian Name		
Address	City	State	Zip	Address	City	State	Zip
Phone (Home)		(Work)		Phone (Home)	(Work)	
Email				Email			
Occupation				Occupation			
Employer				Employer			
Address	City	State	Zip	Address	City	State	Zip
Relationship to Applicant Relationship to Applicant							
If parents are not at	the same ad	dress, to who	m should c	orrespondence	be mailed?		
Please list all siblings	and other per	sons living at a	applicant's r	esidence:			
Name		Age		School		Relation	iship
Name		Age		School		Relation	iship

Supplementary Enrollment Application Questions Please assist us by briefly answering the following questions:
What prompts you to seek admission?
How did you hear about us?
In what situations does your child find the greatest success?
Describe what you feel is the optimal learning environment for your child.
Please tell us about your child's special interests, hobbies, extra-curricular activities, or areas of strength.
In a few words, please describe your child's personality (ie. social interactions, motivators, general attitude, habits).
Other Comments (Optional): In addition, please include any information that will be useful in evaluating the applicant for admission, such as the student's academic abilities, motivations, social development, and achievements.

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Harbor School & Carpe Diem Primary Enrollment Application How did you hear about us? (Please check all that apply.) Current Harbor School Family □ Open House Events 🗖 Alumni *(Name* □ Current Carpe Diem Family □ Internet Search School Fair Child's Current Teacher (Name Chamber of Commerce □ Vashon-Maury Beachcomber □ Strawberry Festival □ Facebook / Social Media □ Vashon Loop □ West Seattle Blog □ Vashon Theater Slide □ Poster / Flyer \Box In the mail Other _____ □ Received email news/e-blast

Application Procedures

Upon receipt of your enrollment application, your child may be invited to attend a scheduled visit day. All enrollment materials must be completed and submitted for an applicant to be included in the open enrollment process. Enrollment materials include:

Enrollment Application

□ Request for Records Form □ Teacher Recommendation Forms

APPLICATION FEE

Please send a non-refundable application fee of **\$50** with your completed Enrollment Application to:

Harbor School Attn: Admissions PO Box 1912 Vashon, WA 98070

Or drop off completed applications to our offices Monday thru Friday. 8 AM - 3 PM); 15920 Vashon Hwy SW* Vashon, WA 98070 *NOTE: This is our physical location, not our mailing address.

FINANCIAL AID

Will be applying for need-based Financial Aid? (*Please check one*) \Box Yes \Box No

If YES, please complete the Financial Aid Application online at http://sssbynais.org/parents/

If you have any questions about this application or the admissions process, please contact:

Niamh Prince, Admissions Director (206) 567-5955 admissions@harborschool.org

NON-DISCRIMINATION POLICY

Harbor School cherishes and promotes the idea of a diverse, inclusive, and accepting community. In our student admissions and in our employment practices, we do not discriminate against any person on the basis of age, gender, disability, ethnic heritage, national origin, religious choice, sexual orientation, gender identity, nor any other trait protected by local, state, or federal law when evaluating an otherwise qualified candidate. As a school, we encourage our community members to come to a place of respect and understanding with all people.



Request for Records or Transcript

Student's Name: _____

Puget Sound Independent Schools member schools are either accredited by or pursuing accreditation through the Northwest Association of Independent Schools (NWAIS). Each of us shares a commitment to a strong academic curriculum in a supportive atmosphere, and we all seek a student body representative of the diverse populations in the Seattle and Tacoma areas. In addition, we all have need-based financial aid programs. With this in mind, we share a common evaluation form in order to assess candidates for admission to our respective institutions. Any school receiving this form may, at the family's request, send it to the admissions office of another participating school.

Date of Birth: _____

In compliance with the "Family Education Rights and Privacy Act of 1974," I respectfully request that you send all confidential and cumulative records to the schools marked below. Further, I hereby give permission for you to release the school records listed to the schools I have applied to through Ravenna-hub, and to Ravenna Solutions as provider of these school's application processing service. Schools receiving these records use them for the purpose of evaluating applicants for admission to their school.

Parent/Guardian Signature:

Printed Name:

Parents/Guardians:

- Fill in your child's name, date of birth, and sign this form to authorize your current school to release records.
- Give your current school a list of schools you wish to deliver transcripts to.

Registrar:

Thank you in advance for helping us get to know this applicant.

• Please complete the Registrar's information below:

Name of School:

Printed Name of Registrar:

Contact Information:

phone: ____

e-mail:

- Submit the following to each school requested by the parents:
 - 1. Progress Reports or Report Cards from the current academic year.
 - 2. Progress Reports or Report Cards from the previous two academic years, if applicable.
 - 3. Attendance records.
 - 4. Results of Standardized testing.

Has this student had any disciplinary issues at your school? \bigcirc Yes \bigcirc No

Please return the requested transcripts & records to Harbor School at the address listed below:

Harbor School Attn: Admissions PO Box 1912 Vashon WA 98070





An Admission Collaborative Connecting Families

Recognizing that completing this form is not part of your official duties, our schools greatly appreciate your helping the applicant by supplying the information requested. Please note that the information you submit will be confidential, will not be shared with the student and family, and will not become part of the student's permanent school records. In order to establish and honor confidentiality, please send this form directly to the schools requested.

Teacher Evaluation Form for Kindergarten Applicants

Applicant's Name:
Current School/Daycare:
Person(s) Completing this Form:

How many children are in your program?

What is the style of your program? (check all that apply)

- \supset language-learning
- ⇒ academic-focused
-) Reggio Emilia
- outdoor/nature
-) other:

- \supset play-based
- Montessori
- → Waldorf

⇒ arts/drama/music

How long have you known this child and in what capacity?

What are the first few words that come to mind to describe this child?

Please comment on this child's strengths:

Do you have any specific concerns?: \supset social \bigcirc emotional \bigcirc cognitive \bigcirc behavioral \bigcirc developmental

What are your primary goals for this child? ______

In group situations, what behaviors does this child typically display?

 \bigcirc Tries to control \bigcirc Takes a leadership role \bigcirc Participates cooperatively \bigcirc Observes

 \bigcirc Seeks attention \bigcirc Won't participate

How would you characterize this child's interactions with other students? With adults?

What, if anything, frustrates this child and how does he/she respond?

Are the parents of this applicant supportive of their child's strengths and challenges? Have their expectations and perceptions of their child and your program been in alignment with yours and your school's?

Readiness Behaviors	consistentl	^y usually	sometimes	rarely	never	
Demonstrates ability to focus on one task	2	S	C	C	C	Additional comments on readiness:
Perseveres with a difficult task	3	C	S	С	C	
Responds positively to redirection	J	C	S	J	J	
Shows creativity and imagination in play and work	2	C	S	J	J	
Displays age-appropriate resilience	2	C	S	C	J	
Can follow the lead of peers	2	C	S	С	C	
Assumes a leadership role with peers	S	C	S	С	C	
Cooperates in work and play	S	C	C	С	C	
Transitions appropriately between activities	2	C	C	С	С	
Shows empathy toward peers and adults	2	C	S	C	C	
Seeks help appropriately when needed	J	C	C	C	J	
Is open to new activities and information	2	C	S	С	C	
Demonstrates awareness of self in space	3	C	S	C	C	
Completes tasks independently	2	C	S	С	C	
Can be hyperfocused on one topic of interest	3	C	S	C	C	
Willingly shares materials with peers	J	C	S	J	J	
Follows multi-step directions to completion	S	C	S	С	C	
Demonstrates self-control on the playground	S	C	S	С	C	
Demonstrates self-control in class	J	C	S	J	J	
Initiates play activities	3	C	S	С	C	
Participates in movement activities and games	3	C	S	С	C	
Uses self-help strategies to manage wardrobe and personal hygiene	3	S	J	3	J	
Exhibits coordinated movement when running, walking, or climbing	5	S	С	С	С	
Displays appropriate risk-taking in physical play	5	C	S	J	J	
Understands and adapts when play becomes too rough	<u></u> З	J	3	C	C	
Shows flexibility with people and activities	2	2	3	J	J	

We would appreciate any additional information which you think would help our school make an informed decision:

Thank you for your time and candor. May w	ve contact you if we need clarification	?)Yes)No
Phone number:	work _ cell _ home	
E-mail:	_ Jwork Jhome	
Signature:	D	ate:

Harbor School is a member of Puget Sound Independent Schools HARBOR SCHOOL | PO Box 1912, Vashon WA 98070 | (206) 567-5955 | admissions@harborschool.org | www.harborschool.org





Teacher Evaluation Form for Elementary (Grades 1+) Applicants

Applicant's Name: _____

Current School: _____ Current Grade: _____

Person(s) Completing this Form:

How long have you known this student and in what capacity?

Recognizing that completing this form is not part of your official duties, our schools greatly appreciate your helping the applicant by supplying the information requested. Please note that the information you submit will be confidential, will not be shared with the student and family, and will not become part of the student's permanent school records. In order to establish and honor confidentiality, please send this form directly to the schools requested.

What are the first few words that come to mind to describe this student?

Student Skills	nsistently	usually	sometime	s rarely	never	
Exhibits empathy toward peers	5	C	С	С	J	Comments:
Cooperates in work and play	3	C	C	J	J	
Resolves differences appropriately	\Box	C	C	C	C	
Assumes a leadership role with peers	\Box	C	C	С	J	
Can follow the lead of peers	\bigcirc	C	C	С	J	
Perseveres with difficult tasks	\Box	С	C	С	C	
Accepts reponsibility for behavior	3	C	C	С	J	
Demonstrates self control in class	3	C	С	С	C	
Demonstrates self control on the playground	3	C	C	C	J	
Transitions appropriately between activities	\Box	C	C	C	J	
Displays age appropriate resilience	2	C	C	C	С	
Contributes to class discussions	\Box	C	C	C	J	
Works with independence and self-direction	\bigcirc	С	C	C	J	
Listens to and follows directions	\bigcirc	C	C	C	J	
Uses class time efficiently	\bigcirc	C	C	C	C	
Sustains attention and focus	5	C	C	C	C	
Accepts criticism appropriately	3	C	C	С	J	
Open to new challenges	\Box	С	С	С	C	
Exhibits problem-solving ability	3	C	C	C	C	
Seeks help appropriately when needed	2	С	C	C	C	

In group situations, what behaviors does this child typically display?

○ Tries to control ○ Takes a leadership role ○ Participates cooperatively ○ Observes ○ Seeks attention Do you have any specific concerns?

○ Fine Motor ○ Gross Motor ○ Social/Emotional ○ Behavioral ○ Speech ○ Reading ○ Writing ○ Math ○ Other Please elaborate:

Additional Information

Please comment upon the applicant's academic and personal strengths:

Please comment upon the applicant's academic and personal challenges:

How are the parents/guardians of this applicant supportive of their child's strengths and challenges? Have their expectations and perceptions of their child and your program been in alignment with yours and your school's?

Please mention any additional information which you think might help our school make an informed decision.

Thank you for your time and candor. May we contact you if we need clarification? \bigcirc Yes \bigcirc No					
Best phone number:	⊃work ⊃cell ∋home				
E-mail:	Swork Shome				
Signature:	Da	te:			

PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS