

ENROLLMENT APPLICATION
for admission to

HARBOR  **SCHOOL**

and

CARPE DIEM PRIMARY
PART OF HARBOR SCHOOL

Applicant's Name

Applicant's Name

Last Name	First Name	Middle	Nickname	
Address		State	Zip	Phone
Date of Birth ____/____/____	Applying for Grade <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 Fall 20____			

Applicant's School History *(Please list all schools previously attended.)*

Current School	Years Attended
Address	School Phone
Teacher/Counselor who best knows the applicant _____	
Other School	Years Attended
Other School	Years Attended

Parent/Guardian Information

Parent/Guardian Name	Parent/Guardian 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 address, to whom should correspondence be mailed? _____

Please list all siblings and other persons living at applicant's residence:

Name	Age	School	Relationship
Name	Age	School	Relationship

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.

How did you hear about us? *(Please check all that apply.)*

- Current Harbor School Family
- Current Carpe Diem Family
- Internet Search
- Child's Current Teacher *(Name _____)*
- Vashon-Maury Beachcomber
- Vashon Loop
- West Seattle Blog
- Poster / Flyer
- Received email news/e-blast
- Open House Events
- Alumni *(Name _____)*
- School Fair
- Chamber of Commerce
- Strawberry Festival
- Facebook / Social Media
- Vashon Theater Slide
- In the mail
- Other _____

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)* Yes 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

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.

Student's Name: _____

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? Yes 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

Teacher Evaluation Form for Applicants to Middle and Upper Schools

Applicant's Name: _____

Current School: _____ Current Grade: _____

Person(s) Completing this Form: _____

Subject: _____ Grade Level: _____

School: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

e-mail: _____

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

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

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.

Academic and Personal Qualities	consistently	usually	sometimes	rarely	never	Please elaborate:
Comes to class prepared	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works independently with focus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Approaches assignments in creative or novel ways	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Listens to and follows directions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Completes classwork and homework on time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Seeks to deepen understanding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Effectively communicates ideas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Synthesizes information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works from internal motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Is aware of his/her own strengths and contributions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Leads and follows appropriately	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works cooperatively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Approaches school and relationships with honesty and integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Takes responsibility for her/his own actions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Works to resolve conflicts with peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Regulates impulses and emotions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Accepts criticism appropriately	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Additional Information

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

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

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?

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

If the school needs clarification, may we contact you by phone and/or email? Yes No

Signature: _____ Date: _____

PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS