



# The Early School Application Form

## Early Childhood for 3-year old children

## Junior Kindergarten for 4-year old children

Please print and return the completed application to the Admission Office with a non-refundable application fee of \$100.00  
Check should be made payable to The Avery Coonley School and mailed to the attention of the Admission Office.

All children must reach the required age by September 1 of the year of eligibility and are required to participate in a one-hour play group session with teachers.

School year:       2008-2009       2009-2010

Please circle preference for morning or afternoon class:

Early Childhood

AM    or    PM                      If either EC session is agreeable, please check this box     

Junior Kindergarten

AM    or    PM                      If either JK session is agreeable, please check this box     

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### Applicant Data

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Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

                    First                      Middle                      Last

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

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

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Male  Female

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### Parental Data

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**Marital Status**     Married     Separated     Divorced     Single

**Parent 1**

Circle one: Mr    Mrs    Ms    Dr

Name \_\_\_\_\_ Relation to applicant \_\_\_\_\_

Email \_\_\_\_\_ Home phone (\_\_\_\_) \_\_\_\_\_

Address (if different from applicant) \_\_\_\_\_

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

Occupation and Title \_\_\_\_\_

Business Name \_\_\_\_\_ Business phone (\_\_\_\_) \_\_\_\_\_

**Parent 2**

Circle one: Mr Mrs Ms Dr

Name \_\_\_\_\_ Relation to applicant \_\_\_\_\_

Email \_\_\_\_\_ Home phone (\_\_\_\_) \_\_\_\_\_

Address (if different from applicant) \_\_\_\_\_

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

Occupation and Title \_\_\_\_\_

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

Business Phone(\_\_\_\_) \_\_\_\_\_

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**Sibling Data**

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**Sibling 1**

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Present School \_\_\_\_\_

**Sibling 2**

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Present School \_\_\_\_\_

**Sibling 3**

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Present School \_\_\_\_\_

**Sibling 4**

Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Present School \_\_\_\_\_

*Please list any relatives, alumni (including yourself) or friends who are attending or have attended The Avery Coonley School.*

Name \_\_\_\_\_ Dates of attendance \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Dates of attendance \_\_\_\_\_ Relationship \_\_\_\_\_

The Avery Coonley School admits qualified students regardless of gender, race, religion, nationality, to all the rights, privileges, programs and activities made available at the school. It does not discriminate on the basis of gender, race, religion, nationality in the administration of its educational policies, admission policies, financial aid program, and athletic or other school administered programs.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parent or legal guardian