

Grades 1 & 2 Application Packet

To apply, please submit the following items:

- Application form
- o \$25 application fee (cash or check made out to Friends School of Portland)
- Student Description (written by the applicant's parent)
- o A copy of all evaluations such as psychological, OT, speech, etc. (if applicable)
- o Transcript release sent to current school
- Current teacher reference

The application deadline for Fall 2019 is January 31, 2019. It is essential that we receive all of the items before we can process your child's application. Once we have received all of the necessary documents, our Admissions Committee will review the file. The Committee will decide whether to invite the applicant for a classroom visit, which is the next step in the application process.

Thank you!



Cumberland Foreside, ME 04110 207-781-6321 Fax: 207-512-5980

Age

11 U.S. Route One

Application for Admission

Applicant In	FORMATION			
Today's Date				
	D.C. IN			
Student Name (Legal) First Middle Last	Preferred Name (if different)			
Applying for admission to: Preschool Kindergarten Grade: 1 2	3 4 5 6 7 8 Beginning (month, year):			
Preschool applicantsplease indicate desired schedule: Mon - Fri Full Day Mon - Fri Mornings (8:15am-Noon)				
Mon, Wed, & Fri Full Day Mon, Wed, & Fri Mornings Tues & Thu Full Day Tues & Thu Mornings				
Date of Birth Age Current School/Grade				
Are you affiliated with the Religious Society of Friends (Quakers) in any v	yay? Please explain.			
Admission decisions are made independently of financial aid considerations. Would you like to receive information on applying for financial aid? Yes No				
PARENT/GUARDIA	N INFORMATION			
Name	Name			
Relation to Applicant Relation to Applicant				
Address	Address(if different)			
Home Phone_	Home Phone(if different)			
Cell Phone	Cell Phone			
Work Phone	Work Phone			
Occupation & Employer	Occupation & Employer			
Email	Email			
FAMILY INFORMATION				
Who is are the applicant's legal quardien(a)?				
Who is/are the applicant's legal guardian(s)?				
With whom does the applicant live? (Please list name and relationship of all individuals who reside in the household and age of siblings.)				
Parent Name	Sibling Name Age			
Parent Name	Sibling Name Age			

WHY FRIENDS SCHOOL OF PORTLAND?
How did you learn about Friends School of Portland? What interests you about FSP?
Why do you believe Friends School of Portland would be a good match for your child?
STUDENT DESCRIPTION
On a separate page, please describe goals for your child's education, the environment in which you believe your child would thriv aspects of your child's intellectual, social, spiritual, and emotional development, or other information that will help us learn more about your child.
For Preschool and Kindergarten Applicants: Please comment briefly about your child's temperament, play style, interests, separati experience, and any significant emotional or developmental strengths or challenges.
<u>For 1st through 8th Grade Applicants:</u> Please comment briefly on your child's temperament, style of peer interaction, past school experiences including strengths, difficulties and interests, and any significant emotional or developmental strengths or challenges.
TESTING OR SUPPORT
Has the applicant ever received additional support services inside or outside of school? ☐ Yes ☐ No
Has the applicant ever been recommended for evaluation? \Box Yes \Box No
Please check any that apply and explain below :
□ IEP □ Learning Difference □ 504 Plan □ RTI Support Plan □ ELL
□ Counseling □ Skip/Repeat a Grade □ CDS/Early Intervention □ Other
Please explain here and include copies of supporting materials (e.g. standardized testing, evaluations, IEP or 504 Plans & progress note
Additional Information
Please describe any special circumstances that the applicant may be dealing with (e.g. applicant or family illness, food/environmen
allergies, separation from/loss of a significant person in the family, etc.). Attach additional pages if necessary.

I (We) understand that the information contained in this application and all accompanying forms is confidential and shall not be disclosed to anyone, including the applicant's family.
I (We) declare that the information reported on this form, to the best of our knowledge and belief, is true, correct and complete.
Date:
Signature of Parent/Guardian
Date:
Signature of Parent/Guardian
Send to: Friends School of Portland, 11 U.S. Route One, Cumberland Foreside, ME 04110 / Or fax to: 207-512-5980

□ \$25.00 Application Fee □ Any Applicable Reports/Evaluations

□ Student Description

Be sure to include:



11 U.S. Route One Cumberland Foreside, ME 04110 207-781-6321

Fax: 207-512-5980

Teacher Reference

Student's Name	Applying to Grade
Confidentiality Statement: I understand that all inf by Friends School of Portland and will not be made	formation furnished on this reference will be held in confidence e available to the applicant's family.
Parent Signature	Date
	p us determine whether Friends School of Portland is an ur complete candor will be appreciated. We ask that you respond that the processed until we have this document.
In what capacity have you worked with the applicant?	? How long have you known this child?
	esses does the applicant display? Is this child a competent and imself verbally and in writing? Please be as specific as possible with
	? Is the child a leader? A follower? A participant? An observer? e the applicant's friendships? How does the child get along with adults?
	ow directions well? Does s/he tend to work and play independently or rough on academic tasks? Exhibit curiosity and motivation? Please

What are the personal strengths and needs of the ap humor and integrity. Feel free to include specific an		esponsibility, leadership, sense of
and and group and an arrange and arrange and arrange and arrange arran		
Please comment on special interests or abilities of th	e applicant.	
Does the applicant have any impairment in speech, I processing of which we should be aware? Has the ch	iearing, vision, muscular development, ild ever been evaluated or received cou	or visual/auditory perception or nseling or tutoring of any kind?
Please be specific.		
What advice would you offer to someone working w	ith this child?	
what advice would you offer to someone working w	itir tins cinit.	
Please give an example of the parents'/guardians' pa	articipation in the school community.	
Your Name (please print)		Date
Title	School Name/City	
School Phone	Your Email	
Signature		



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Transcript Release

Student Name_____ Current Grade_____

Dear Parent: Please complete and send this form to the school in which your child is presently enrolled.
I authorize the release of all educational records, including progress reports and student testing, of the above-named student to Friends School of Portland at the address below.
This includes:
• A copy of the applicant's most recent progress report from the current school year.
• Final report card from the previous school year.
Standardized test results.
Any educational or psychological evaluations.
Any additional teacher reports.
• Current IEP and most recent meeting notes (if applicable).
Parent Signature Date

Please mail the requested information as soon as possible to:

Friends School of Portland Admissions Office 11 U.S. Route One Cumberland Foreside, ME 04110