



11 U.S. Route One
Cumberland Foreside, ME 04110
207-781-6321
Fax: 207-512-5980

Application for Admission

APPLICANT INFORMATION

Today's Date _____

Student Name (Legal) _____ Preferred Name _____
First Middle Last (if different)

Applying for admission to: Preschool Kindergarten Grade: 1 2 3 4 5 6 7 8 Beginning (month, year): _____
(circle one)

Preschool applicants--please 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 way? 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/GUARDIAN 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 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.)

Name Relationship

Name Relationship

Name Relationship

Name Relationship

* OVER *

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 thrive, 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, separation experience, and any significant emotional or developmental strengths or challenges.

For 1st through 8th Grade Applicants: 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? Yes 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 notes).

ADDITIONAL INFORMATION

Please describe any special circumstances that the applicant may be dealing with (e.g. applicant or family illness, food/environmental 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.

Signature of Parent/Guardian Date:

Signature of Parent/Guardian Date:

Send to: Friends School of Portland, 11 U.S. Route One, Cumberland Foreside, ME 04110 / Or fax to: 207-512-5980

Be sure to include: Student Description \$25.00 Application Fee Any Applicable Reports/Evaluations



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Personal Reference

I, _____, parent/guardian of the child named below, **do** / **do not**
waive my right to view this reference for my child _____, who has
applied for admission to Friends School of Portland.

Parent/guardian signature

Friends School of Portland is an independent school guided by Quaker values and organized in multi-age classes, beginning with Preschool for 3 & 4 year olds, Kindergarten for 5 year olds, Grades 1-2, 3-4, 5-6, and 7-8.

Your thoughtful comments will help us determine whether Friends School of Portland is an appropriate learning environment for this child. Your complete candor will be appreciated. We ask that you respond as promptly as possible, as the child's application cannot be processed until we have this document.

In what capacity and for how long, have you known the applicant and her/his family?

What are your impressions of the applicant? Please describe the child's abilities and needs, as you see them, with regard to intellectual, emotional, social, and physical development.

In what ways do you see the applicant's home life supporting his/her learning and growing?

Please use the back of this paper for any additional comments which might help us become better acquainted with the applicant and her/his family.

Name _____

Date _____

Address _____

Phone _____



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Preschool Teacher Reference

I, _____, parent/guardian of the child named below, **do** / **do not**
waive my right to view this reference for my child _____, who has
applied for admission to Friends School of Portland.

Parent/guardian signature

Friends School of Portland is an independent school guided by Quaker values and organized in multi-age classes, for preschool through grade 8.

Your thoughtful comments will help us determine whether Friends School of Portland is an appropriate learning environment for this child. Your complete candor will be appreciated. We ask that you respond as promptly as possible, as the child's application cannot be processed until we have this document.

In what capacity have you worked with this child?

What are your impressions of the child? Please describe the child's abilities and needs, as you see them, with regard to cognitive, emotional, social, and physical development.

How does the applicant get along with other children? How does the child get along with adults?

Is this child at ease in a group? Does she/he prefer free play or structured activities? Is her/his impulse control age-appropriate?

OVER

Does this child have any impairment in speech, hearing, vision, muscular development, or visual/auditory perception or processing of which we should be aware? Has the child ever been evaluated or received counseling or services of any kind? Please be specific.

What advice would you offer to someone working with this child?

Please comment on parent participation in the school community and /or support of the child's school experience.

Please provide any additional comments which might help us become better acquainted with this child and her/his family.

Name (please print) _____ Date _____

Title _____ School Name _____

School Address _____

School Phone _____ Home Phone (optional) _____

Signature _____



Independent Toileting Requirement for Preschool and Kindergarten

Independent toileting is a requirement for children entering preschool and kindergarten at Friends School of Portland.

Many people think their children are toilet trained if the child lets them know of the need to use the bathroom, but if the adult must do any of the following tasks, either physically or through verbal coaching, the child is not independently toileting.

While we know that not all children of preschool age are developmentally ready for these skills, the reality of staffing and class numbers means that teachers cannot be available to frequently help with toileting. We also believe that independent toileting is indicative of an overall developmental level that suggests a child will thrive in our preschool program.

We expect a child to have the following skills firmly established during the summer prior to beginning preschool and kindergarten:

- Know how to use a real toilet, not just a potty chair
- Be comfortable toileting in locations other than home
- Be able to remove any necessary clothing and re-clothe themselves with minimal teacher assistance
- Be able to use the toilet when asked to do so as part of the daily routine, such as before naps or outings
- Successfully place bowel movements and urine into the toilet, not on the floor, seat, walls, or into their own clothing
- Clean themselves after urinating or having a bowel movement, including putting used toilet paper into the toilet
- Flush the toilet

Of course some accidents are to be expected and teachers will certainly assist children during an initial adjustment period to become familiar with the school routines and facilities. However, that initial adjustment will not be extended for full-time children beyond two weeks, and for part-time children for a period which allows the child to have had 14 school days. If a child continues to have difficulty staying dry or competently using the toilet after this time, the school may ask that he or she discontinue school attendance until the skill is firmly in place. If a child is not prepared to return to the school, a tuition refund will be offered.