

# Application for Admission

## Elmwood Franklin School

I hereby make application to enter \_\_\_\_\_  
Student's Name

in The Elmwood Franklin School for the year 20\_\_ - 20\_\_, and enclose the processing fee of \$50, which is not refundable.

M  F Applying for Grade\_\_ Prefers to be called \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

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

Current School \_\_\_\_\_

School Mailing Address \_\_\_\_\_

Current Grade Level \_\_\_\_\_ Teacher's Name \_\_\_\_\_ Phone \_\_\_\_\_

If necessary, may we speak to your child's previous teacher? \_\_\_\_\_



### Parents or legal guardian:

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Home Address \_\_\_\_\_ Home Address \_\_\_\_\_

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

Home Phone ( ) \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

Cellular Phone ( ) \_\_\_\_\_ Cellular Phone ( ) \_\_\_\_\_

E-mail Address \_\_\_\_\_ E-mail Address \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Mother's Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Business Address \_\_\_\_\_ Business Address \_\_\_\_\_

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

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

If remarried, \_\_\_\_\_ If remarried, \_\_\_\_\_  
Stepmother's Name \_\_\_\_\_ Stepfather's Name \_\_\_\_\_

If parents do not share the same address, to whom should correspondence be sent?

Father  Mother  Both

Person responsible for tuition:  Father  Mother  Other

List brothers and sisters of applicant:

Name	Age	Current School
_____	_____	_____
Name	Age	Current School
_____	_____	_____
Name	Age	Current School
_____	_____	_____

How did you hear about Elmwood Franklin School?

\_\_\_\_\_

Are you an alumnus?  Yes  No Class of \_\_\_\_\_

Why do you want your child to attend Elmwood Franklin School?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We welcome additional comments you may wish to make about your child. A parent's perspective helps us know each applicant more completely. Please include any challenges or special needs of which we should be aware, and any allergies your child has.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tuition Assistance recipients represent a cross section of our student body and the community in which we live – two-working-parent households, single parents, and the culturally and ethnically diverse. No student should fail to apply to EFS solely because of financial considerations. While no student receives full tuition assistance, EFS remains committed to providing financial help to families of qualified students who otherwise could not attend our school.

We would like a Tuition Assistance Packet.

Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

(Elmwood Franklin School accepts qualified students without regard to race, color, religion, or national origin.)

For grades 1 through 8, please sign the transcript release form and take it to your child's current school along with a teacher recommendation form. The application deadline is March 1.