

San Francisco Waldorf High School International Student Parent Application

Applicant Information

Name of Applicant (first, middle, last) _____
Preferred name/nickname _____ Male Female E-Mail _____
Address _____
Candidate for the _____ Grade in the Fall of _____
Student's Primary Address _____
City _____ State _____ Zip _____ Home _____
Telephone _____
Birthdate _____ Place of Birth _____
Country of Citizenship _____
Other languages spoken at home _____

Applicant's School Information

Present School _____ Current Grade _____

Family Information

Parent/Guardian I (In country of residency) (Mr., Mrs., Dr., Ms.) and Name Relationship to Applicant Home Address City, Country Home Telephone /Cell Occupation/Position Business/Firm Business Telephone High School/college(s) attended E-Mail Address and Fax	Parent/Guardian II ((In country of residency) (Mr., Mrs., Dr., Ms.) and Name Relationship to Applicant Home Address City, Country Home Telephone /Cell Occupation/Position Business/Firm Business Telephone High School/college(s) attended E-Mail Address and Fax
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Would you like correspondence to be sent to an address in addition to the student's primary address listed above? _____

Person(s) financially responsible for the applicant: _____

Please write on a separate sheet of paper a brief statement about why you think that the Waldorf High School would be a match for you child. Responses should not exceed 250 words.

4. Please write a statement of recommendation for your child; a parental/guardian's perspective on his/her strengths and weaknesses is valuable. Please limit your comments to the space provided.

5. (Optional) Please share any information that will help us better know your child; this might include health, learning differences, tutoring, accelerated programs, family circumstances.

Please list name and age of siblings of applicant:

Confidentiality

The undersigned agrees that all school records and information pertaining to the application of the named student to any of the above listed participating schools shall be completely confidential and shall not be disclosed to anyone, including the student and his/her family. The undersigned, on behalf of the above named student and his/her parents or guardians, further agrees not to seek access to such confidential information, including recommendations and evaluation materials before or after completion of the high school admission process for the above named student.

Parent/Guardian Signature: _____ Date: _____