



## APPLICATION FOR ADMISSION

1. Name of student: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
*(Last) (First) (Middle)*
2. Address: \_\_\_\_\_  
*(Street) (City) (State) (Zip)*
3. Telephone: \_\_\_\_\_  
*(Home) (Work - Father) (Work - Mother)*
4. Applying for entrance in school year beginning September \_\_\_\_\_  
*(year)*  
In Grade 3 4 5 6 7 8 9 10 11 12 (Circle one)
5. Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*(month) (day) (year)*
6. School currently attending: \_\_\_\_\_
7. Estimated grade average in current school year: **(A, B, C, etc.)** \_\_\_\_\_  
*English Math* Current math course \_\_\_\_\_
8. Previous schools attended (please list names and years of attendance):
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
9. Applicant's religious affiliation: \_\_\_\_\_
10. Does the applicant have any brothers or sisters? \_\_\_\_\_ If Yes, please give names and ages: \_\_\_\_\_  
\_\_\_\_\_
11. Father's name: \_\_\_\_\_  
*(Last) (First) (Middle) (Title\*)*
12. Mother's name: \_\_\_\_\_  
*(Last) (First) (Middle) (Title\*)*
13. Email: \_\_\_\_\_  
*(Father) (Mother)*

*(\*i.e., Mr., Mrs., Dr., etc.)*

14. Father's education (please list names of schools, years completed, and degrees or diplomas received):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

15. Father's present professional position and place of employment: \_\_\_\_\_

16. Mother's education (please list names of schools, years completed, and degrees or diplomas received):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

17. Mother's present professional position and place of employment: \_\_\_\_\_

18. Please indicate applicant's:

- A. Special Interests/Hobbies: \_\_\_\_\_
- B. Favorite book: \_\_\_\_\_
- C. Sports Preferences: \_\_\_\_\_
- D. Awards/Honors: \_\_\_\_\_

19. How did you learn of The Avalon School? \_\_\_\_\_

20. Please list the names of any Avalon families you know:

21. Are there any family, health or learning concerns of which the school should be aware?

Signature of Parents: \_\_\_\_\_ (Father) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Mother) \_\_\_\_\_ (Date)

Please return the application with a \$50.00 non-refundable fee to:

**Director of Admission**  
 The Avalon School  
 200 W. Diamond Ave  
 Gaithersburg, MD 20877  
 301-320-0668 • 301-320-3748 FAX  
 www.avalonschools.org