



# Application

Student's Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Birth date: \_\_\_\_\_ Applying for (month/year): \_\_\_\_\_

**ELEMENTARY GRADES: (CIRCLE GRADES)**

1  half day or  full day  
2 3 4 5 6 7 8

Mother's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Business name and address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_

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

Residential Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Business name and address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

If parents have separate addresses, child lives with:  Mother  Father  Both

Correspondence should be addressed to:  Mother  Father  Both

Names and birth dates of other children in family: \_\_\_\_\_

Name(s) of school(s) attended:

Name	Address	Dates attended	Grade(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Current or last grade attended: \_\_\_\_\_

Name and phone number of previous teacher to call for reference: \_\_\_\_\_

Has your child received educational support? In school: \_\_\_\_\_

Outside of school: \_\_\_\_\_

Does your child know any foreign languages? \_\_\_\_\_

Does your child play an instrument? \_\_\_\_\_

Is your child currently taking any medication? \_\_\_\_\_

Please tell us anything else teachers should know about your child. \_\_\_\_\_

How did you hear about our school? \_\_\_\_\_

- Requesting tuition assistance information       Requesting extended day program information (for nursery through 3<sup>rd</sup> grade)  
 I would be interested in extended care for my 4<sup>th</sup> through 8<sup>th</sup> grade child

\_\_\_\_\_  
*Signature of Parent or Guardian*

\_\_\_\_\_  
*Date*

**A \$50 non-refundable fee must accompany this application.**

GBRSS welcomes students without regard to race, creed, gender or national origin.

(For office use only) Date Received: \_\_\_\_\_

Check No.: \_\_\_\_\_ Check date: \_\_\_\_\_

cc: Teacher  
Business Office  
DB