

# THE FRASER-WOODS SCHOOL

173 South Main Street  
Newtown, Connecticut 06470  
203-426-3390

## Application for 20\_\_\_\_\_

### *Lower School*

- |   |  |
|---|--|
| <input type="checkbox"/> Toddler Half Day     | <input type="checkbox"/> Lower School Half Day     |
| <input type="checkbox"/> Toddler Extended Day | <input type="checkbox"/> Lower School Extended Day |

### *Elementary School*

- |                                       |                                       |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> First Grade  | <input type="checkbox"/> Fourth Grade |
| <input type="checkbox"/> Second Grade | <input type="checkbox"/> Fifth Grade  |
| <input type="checkbox"/> Third Grade  |                                       |

### *Middle School*

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Sixth Grade   | <input type="checkbox"/> Eighth Grade |
| <input type="checkbox"/> Seventh Grade |                                       |

Student's Name \_\_\_\_\_ Gender \_\_\_\_\_

Date of Birth \_\_\_\_\_ Student is usually called \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

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

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

Telephone ( ) \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Father's Occupation/Title \_\_\_\_\_ Mother's Occupation/Title \_\_\_\_\_

Father's Employer \_\_\_\_\_ Mother's Employer \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

(over)

Are Parents separated or divorced? (If yes, please answer the following)

With whom does the child live? \_\_\_\_\_ Who is the legal guardian? \_\_\_\_\_

Who should receive bills? \_\_\_\_\_ Who should receive mailings? \_\_\_\_\_

Grandfather's Full Name \_\_\_\_\_ Grandfather's Full Name \_\_\_\_\_

Grandmother's Full Name \_\_\_\_\_ Grandmother's Full Name \_\_\_\_\_

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

\_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Schools attended and dates (include art, music, play groups, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you become interested in our school? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please include in the space below any information which you feel will affect your child's experience at school, and also, what your expectations are regarding your child's school experience. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form and a non-refundable application fee of \$50.00 payable to The Fraser-Woods School by February 1st.**

*The Fraser-Woods School admits students of any race, color, national and ethnic origin to all the programs and activities offered at the school. It does not discriminate on the basis of race, color, national and ethnic origin in its educational policies, admissions policies, scholarship and loan programs, athletic or other school programs.*