



Application

APPLICANT

Last, First, Middle, Preferred Name			
Gender		Present Age	Date of Birth
Program Applying for: <input type="checkbox"/> 2-Year Old Program <input type="checkbox"/> 3-Year Old Program <input type="checkbox"/> Pre-Kindergarten <input type="checkbox"/> Kindergarten <input type="checkbox"/> 1st Grade <input type="checkbox"/> 2nd Grade		Year Applying for: If applying for 2- or 3-Year Old Program, specify number of days you prefer: <input type="checkbox"/> 2 days per week <input type="checkbox"/> 3 days per week <input type="checkbox"/> 5 days per week	
Home Address			Telephone Number
Current School		Address of School	
Telephone for Current School		Head of School	
Previous Schools Attended/Dates of Attendance			
Applicant's Primary Language/Other Languages Spoken			Applicant's Ethnicity(optional)
Does your child have any physical limitations or health conditions? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please explain:			

FAMILY

Parent/Legal Guardian Name (Last, First, Middle)			
Address			
Occupation	Home Phone	Work Phone	Cell Phone
Email			
Parent/Legal Guardian Name (Last, First, Middle)			
Address			
Occupation	Home Phone	Work Phone	Cell Phone
Email			

(over)

Check all that apply:

parents together parents separated parents divorced mother deceased father deceased father remarried mother remarried single parent other

With whom does the child reside?

Who has legal custody of the child?

Name of stepparent(s) if applicable:

Other children in the family:

Name

Year of Birth

Present School

Name	Year of Birth	Present School
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Any unusual family situations:

Name of person financially responsible for tuition and fees:

How did you hear about this school?

Any other information you would like us to have about your child:

\$35 application fee required for submission

Check here if you wish to have financial assistance information mailed to you.

Print Name

Signature

Date

Supplemental Application

What do you like best about Charlottesville Day School at ACAC?

Why do you think CDS is the right school for your child?

Tell us about your child:

Additional comments:

(RECENT PHOTO)