



## 2018 Application

Boarding     Day

### Applicant Information

Applicant's Full Legal Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
(First, Middle, Last)

Date of Birth \_\_\_\_\_ Rising Grade \_\_\_\_\_ Email Address \_\_\_\_\_  
Month/Day/Year

Applicant's Home Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Home Fax \_\_\_\_\_ Gender  Male  Female

Place of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_  
(City, State, Country)

If the applicant is not a U.S. citizen, will he or she need a Form I-20 to attend Rectory School.  Yes  No

Will you be applying for financial aid?  Yes  No If yes, please visit [sssbynais.org](http://sssbynais.org) to begin the financial aid process.

### General Information

Has the applicant ever been evaluated or provided special accommodations for academic or emotional reasons, please describe. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please describe the candidate's general health, Please be specific with the inclusion of a list of any current medications. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Education

Name of Current School \_\_\_\_\_ Dates of Attendance \_\_\_\_\_

School Address \_\_\_\_\_

## Household I

Please use this part to provide information about the adults in the applicant's primary or custodial residence.

Parent One \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Parent / Guardian I: Preferred form of address:  Dr.  Mr.  Mrs.  Ms. Relation to applicant: \_\_\_\_\_

E-Mail \_\_\_\_\_

Employer \_\_\_\_\_ Occupation/Title \_\_\_\_\_

Employer's Address \_\_\_\_\_

Parent / Guardian 2: Preferred form of address:  Dr.  Mr.  Mrs.  Ms. Relation to applicant: \_\_\_\_\_

Parent Two \_\_\_\_\_

E-Mail \_\_\_\_\_

Employer \_\_\_\_\_ Occupation/Title \_\_\_\_\_

Employer's Address \_\_\_\_\_

## Household 2

Please use this part to provide information about the adults in the applicant's secondary or non-custodial residence.

Parent One \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Parent / Guardian I: Preferred form of address:  Dr.  Mr.  Mrs.  Ms. Relation to applicant: \_\_\_\_\_

E-Mail \_\_\_\_\_

Employer \_\_\_\_\_ Occupation/Title \_\_\_\_\_

Employer's Address \_\_\_\_\_

Parent / Guardian 2: Preferred form of address:  Dr.  Mr.  Mrs.  Ms. Relation to applicant: \_\_\_\_\_

Parent Two \_\_\_\_\_

E-Mail \_\_\_\_\_

Employer \_\_\_\_\_ Occupation/Title \_\_\_\_\_

Employer's Address \_\_\_\_\_

## Sibling Information

If there are siblings who are not already enrolled at or applying to the school please list them. Please list name, age and school attending.

\_\_\_\_\_

## Relatives

Please list any relatives that have attended or are currently attending Rectory School.

Parent Statement – What do you hope your child will gain by attending Summer@Rectory?

Lined area for parent statement response.

Student Statement – Why are you interested in attending Summer@Rectory?

Lined area for student statement response.

Signatures - I attest by the signatures below, the information provided on this application is complete and accurate.

Applicant Signature: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_

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

Rectory School admits students of any race, color, religion, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to the students at the school. It does not discriminate on the basis of race, color, religion, national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and other school-administered programs.