

Participating Bay Area Independent High Schools

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| <input type="checkbox"/> The Bay School of San Francisco | <input type="checkbox"/> Jewish Community High School of the Bay | <input type="checkbox"/> Santa Catalina School |
| <input type="checkbox"/> The Branson School | <input type="checkbox"/> Marin Academy | <input type="checkbox"/> Sonoma Academy |
| <input type="checkbox"/> Convent of the Sacred Heart High School | <input type="checkbox"/> The Marin School | <input type="checkbox"/> Stuart Hall High School |
| <input type="checkbox"/> Crystal Springs Uplands School | <input type="checkbox"/> Mid-Peninsula High School | <input type="checkbox"/> The Urban School of San Francisco |
| <input type="checkbox"/> Drew School | <input type="checkbox"/> San Francisco University High School | <input type="checkbox"/> Waldorf School of the Peninsula High School |
| <input type="checkbox"/> International High School | <input type="checkbox"/> San Francisco Waldorf High School | |

Part I: Parent/Guardian Common Application Form

To the Parent/Guardian: This common parent/guardian form only completes *one* portion of your student’s application for the schools listed above. Please consult school-specific information for individual application fees, deadlines, and procedures. Typewritten responses are acceptable; *however, please limit your responses to space comparable to what is provided.* Please photocopy and mail a copy of this form to each of the schools to which you are applying. **Please attach the appropriate application fee to this form for each individual school to which you are applying.**

Applicant Information

Name of Applicant (first, middle, last) _____ Preferred name/nickname _____
 Male Female E-Mail Address _____ Candidate for the _____ Grade in the Fall of _____
 Student’s Primary Address _____
 City _____ State _____ Zip _____ Home Telephone _____
 Birthdate _____ Place of Birth _____ Country of Citizenship _____
 Other languages spoken at home _____

Applicant’s School Information

Present School _____ Current Grade _____ School Address _____
 City _____ State _____ Zip _____ School Telephone _____
 Previous School(s) and grade(s) attended _____

Family Information

Parent/Guardian I

Parent/Guardian II

(Mr., Mrs., Dr., Ms.) and Name	(Mr., Mrs., Dr., Ms.) and Name
Relationship to Applicant	Relationship to Applicant
Home Address	Home Address
City, State, Zip	City, State, Zip
Home Telephone /Cell	Home Telephone /Cell
Occupation/Position	Occupation/Position
Business/Firm	Business/Firm
Business Telephone	Business Telephone
High School/college(s) attended	High School/college(s) attended
E-Mail Address and Fax	E-Mail Address and Fax

Please check all that apply:

- Parents/Guardians together Parents/Guardians separated Single Parent/Guardian Parents/Guardians divorced
 Parent/Guardian I remarried Parent/Guardian I deceased: relationship to applicant _____
 Parent/Guardian II remarried Parent/Guardian II deceased: relationship to applicant _____

If separated or divorced, with whom does the student reside? _____
 If Parent/Guardian I is remarried, spouse’s full name and address: _____
 If Parent/Guardian II is remarried, spouse’s full name and address: _____
 Would you like correspondence to be sent to an address in addition to the student’s primary address listed above? _____
 Person(s) financially responsible for the applicant: _____

1. Has the applicant attended summer school in the past five years? If so, why (remedial or enrichment), when and what subjects were taken?

2. Has the applicant skipped or repeated a grade? If so, when?

3. **(Required for all schools):** For each school to which your child is applying, please write on a separate sheet of paper and mail to each school a brief statement about why you think that school would be a match for your child. Please be sure to include your child's name.
Responses should not exceed 250 words.

4. Please write a statement of recommendation for your child; a parental/guardian's perspective on his/her strengths and weaknesses is valuable. Please limit your comments to the space provided.

5. **(Optional)** Please share any information that will help us better know your child; this might include health, learning differences, tutoring, accelerated programs, family circumstances.

Please list siblings of applicant:
Name

Age

All schools attended (K-8, High School, College)

Grade Level

Confidentiality

The undersigned agrees that all school records and information pertaining to the application of the named student to any of the above listed participating schools shall be completely confidential and shall not be disclosed to anyone, including the student and his/her family. The undersigned, on behalf of the above named student and his/her parents or guardians, further agrees not to seek access to such confidential information, including recommendations and evaluation materials before or after completion of the high school admission process for the above named student.

Parent/Guardian Signature: _____ Date: _____