

OFS Application and Terms of Admission

APPLYING FOR: Grade _____ School Year _____ Date Submitted _____
 Before School Care for Academic Year _____ After School Care for Academic Year _____

Student Name _____ Nickname (*if commonly used*) _____
Date of Birth _____ Place of birth _____ Sex _____ Student lives with ___ Mother(s) ___ Father(s) ___ Other(s) _____
Age and sex of siblings _____

Parent Name _____ Employer/Position _____
Home Address _____ Business Phone _____
City, State, Zip _____ Cell Phone _____
Home Phone _____ Ethnic Origin (*optional*) _____
Email _____ Spiritual Preference (*optional*) _____

Parent Name _____ Employer/Position _____
Home Address _____ Business Phone _____
City, State, Zip _____ Cell Phone _____
Home Phone _____ Ethnic Origin (*optional*) _____
Email _____ Spiritual Preference (*optional*) _____

Present or most recent school

Name _____
Street Address _____
City, State, Zip _____
Phone/web address _____

Does your child have any emotional or health conditions of which the school should be made aware? __ yes __ no
If YES, please explain:

Has your child undergone any academic, diagnostic, psychological or other testing? __ yes __ no
If YES, please indicate below the nature of the testing and provide a copy of the test results with the application.

Is your child currently taking, or has s/he ever taken, any medication? __ yes __ no
If YES, please elaborate:

What do you see as your child's strengths?

What do you see as your child's areas for development?

PLEASE
ATTACH
PHOTO

Please feel free to attach any other information if space is not sufficient.

Over, please.

Please list your child's interests, hobbies, and special talents.

What activities do you participate in as a family at home and in the community?

Areas of expertise that you may want to share with the children at the School.

Terms of Admission

Please read the following carefully and sign below.

- This application is a request for admission. All information shall be treated as confidential material.
- The School reserves the right to accept or reject this applicant and also to request the withdrawal of any student if this action is thought to be of benefit to the student or the School.
- Oneness-Family School does not discriminate on the basis of race, religion, gender, disability, national or ethnic origin, political affiliation, or sexual orientation in Admissions or in our Financial Aid policies.

I/We have read and understand these Terms of Admission. If my/our child is accepted and enrolled, I/we agree to the terms stated above.

Signature(s) of Parent(s) or Legal Guardian(s):

Signature

Date

Signature

Date

Please return Application Form and application fee to:

*Oneness-Family School
Attn: Office of Admissions
6701 Wisconsin Ave.
Chevy Chase, MD 20815*

Revised 02-22-09