

IND JPk	ICATE YOUR PREF	ERENCE:
	Monday –Wednesday Tuesday – Thursday Monday through Frid Half Days (8-12) Full Days (8-3)	J
PK	Half Days (8-12) or	Full Days (8-3)

APPLICATION FOR ADMISSION

STUDENT NAME:First	Middle		Last	
Date of Birth:	Birthplace:		Boy:	Girl:
The State of Indiana Department of Educati 7 designated ethnicity categories. Please as Ethnicity: 1.) American Indian/Alaskan 4.) Hispanic & any other race 6.) Multiracial (two or more r	ssist us in providir Native 2.	ng this required ir) Black	nformation. Th 3.) Asian _	nank you.
At Evansville Day School we recognize and originates. Please assist us in identifying ou				
Country of Origin: Parents		Child		
What is the native language of the student?):			
What language(s) is spoken most often by t	the student?:			
What language(s) is spoken by the student	in the home?:			
Applying for Grade: Beginn	ing:	Social Secur	rity #:	
Present School & Address:				
Number of years in present school:	Pr	Present grade:		
Has applicant skipped any grades?:	Re	Repeated?:		
Parent's/Guardian's Full Name		arent's/Guardian's ıll Name	•	
Address	Ac	ddress		
City State Zip	Ci	ty	State	Zip
Home Phone	Но	ome Phone		
Cell Phone	Ce	ell Phone		
E-Mail	E-	Mail		
Place of Employment	Pl	ace of Employme	nt	
Business Phone	Bı	Business Phone		
Position of Employment		Position of Employment		

Other children in family? NAME	BIRTHDATE	PRESENT SCHOOL
How did you hear about EDS?		
Will you be applying for financial aid? (Financial aid is not available for Jr.PreK		
Does student have or has he/she ever ha aware? Please describe briefly these con performance (e.g. health, allergies, acade possible.	ncerns or any other concerns that	have affected or may affect school
This application is not considered comple Questionnaire have been submitted.	ete until transcripts/records, Teach	ner Reference, and the Parent
Have records been requested? Yes	No Date:	
(If needed, Request for Records form is a	available from Admission office.)	
Application and admission is made with trequest withdrawal of a student whose fair mpacts the educational environment, do is believed to be detrimental to the welfair	amily fails to disclose personal and les not meet the academic require	d/or academic information that
Further, in accordance with the Family Edreference and/or evaluations provided to		
I wish to apply for admission of my son/o	daughter	
		Name
in the grade to begin in	Specify Month,	Year
 Date	Signature of Pa	rent or Guardian

This application is merely a statement of intent, not a contract. A formal contract must be signed after the applicant is accepted for admission. This application is not considered complete until transcripts/records, two Teacher Reference forms and the Parent Questionnaire has been submitted. A non-refundable fee of \$30.00 must accompany this application.

*Evansville Day School is accredited by the Independent Schools Association of the Central States (ISACS) and is a member of the National Association of Independent Schools (NAIS).

Evansville Day School is an academic community, whose doors are open to all students without regard to race, religion, sex or national origin.