

MAINE COAST WALDORF SCHOOL

APPLICATION FOR ADMISSION TO HIGH SCHOOL (to be completed by parent)

57 Desert Road
Freeport, ME 04032
P: 207-865-3900
F: 207-865-6822
www.maine coastwaldorf.org

Student's Full Name _____ Birthdate _____ Gender _____
month/date/year

Applying for Grade _____ Desired Date of School Entrance _____

Full name of parent _____ Home telephone _____

Home address _____
street city state zip

Occupation _____ Name of employer _____

Business telephone _____ Cell phone _____

Personal (private) email _____

Full name of parent _____ Home telephone _____

Home address _____
street city state zip

Occupation _____ Name of employer _____

Business telephone _____ Cell phone _____

Personal (private) email _____

Parents are married separated divorced share custody single

If parents are separated or divorced,

Student lives with _____

Correspondence should be addressed to _____

Billing (Bills may be sent to only one address.) _____

5. Explain why you are considering Maine Coast Waldorf School for your child. Also, please tell us how familiar you are with Waldorf education.

School Information

Current School _____

Address _____
street city state zip

Telephone _____

Previous school(s) attended

name of school for what grades?

name of school for what grades?

Siblings and ages

name gender D.O.B. current school grade

name gender D.O.B. current school grade

name gender D.O.B. current school grade

We appreciate the information you have given us. It will help us to understand your child's needs and will remain confidential.

Who is financially responsible for school expenses? _____

Will you be applying for tiered tuition? ___ yes ___ no

Parent/Guardian Signature _____ Date _____

Maine Coast Waldorf School does not discriminate on the basis of race, religion, gender, sexual orientation and national or ethnic origin in the administration of its educational programs, hiring, self-government, admissions, financial aid and all other school-related activities.