



# Bonita Country Day School

Teaching students *how* to think, not *what* to think.

## Application for Admission

Revised 1/10/2007

Applicant's Name \_\_\_\_\_  Male  Female  
Applying for:

Full-time Preschool  Part-time Preschool  Accelerated Kindergarten  Elementary Grade

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ School Year: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month Day Year

Home Address \_\_\_\_\_

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

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone/Pager (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Father's Name \_\_\_\_\_

Home Address (if different) \_\_\_\_\_

Occupation & Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Telephone #1 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Telephone #2 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mother's Name \_\_\_\_\_

Home Address (if different) \_\_\_\_\_

Occupation & Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Telephone #1 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Telephone #2 (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Are the applicant's parents divorced or separated? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, with whom does the applicant live? \_\_\_\_\_ To whom should school reports be sent? \_\_\_\_\_

Is the applicant adopted or a ward of the state? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, at what age? \_\_\_\_\_

Who is financially responsible for the applicant? \_\_\_\_\_

| Name & relationship of applicant's brothers(s) and/or sister(s) | Age   | Living with applicant? |          |
|---|-------|------------------------|----------|
| _____   | _____ | _____ Yes              | _____ No |
| _____   | _____ | _____ Yes              | _____ No |
| _____   | _____ | _____ Yes              | _____ No |

Does your child have any special needs of which we should be aware? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, please explain particular circumstances, such as speech, health or learning problems on a separate sheet.

School in which applicant is presently enrolled \_\_\_\_\_

Mailing address \_\_\_\_\_

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

Previous school attended by applicant, if applicable \_\_\_\_\_

Mailing address \_\_\_\_\_

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

References (If currently attending school, at least one reference should be a current teacher or administrator)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_ Dates \_\_\_\_\_

Mailing address \_\_\_\_\_

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

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_ Dates \_\_\_\_\_

Mailing address \_\_\_\_\_

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

Please list any friends or relatives that have attended Bonita Country Day School

Name \_\_\_\_\_ Dates attended, if known \_\_\_\_\_

Name \_\_\_\_\_ Dates attended, if known \_\_\_\_\_

Name \_\_\_\_\_ Dates attended, if known \_\_\_\_\_

Are you applying to other schools? If so, please list those schools?

School Name \_\_\_\_\_ Date of application \_\_\_\_\_

School Name \_\_\_\_\_ Date of application \_\_\_\_\_

School Name \_\_\_\_\_ Date of application \_\_\_\_\_

I authorize Bonita Country Day School to obtain academic records and recommendation forms for my child.

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

Bonita Country Day School does not discriminate on basis of sex, age, race, color, national or ethnic origin in the administration of it's educational programs including admissions policies and school administered programs and activities.

**Please send Application for Admission, \$75. non-refundable application fee and supporting materials to:  
Bonita Country Day School Attn: Ms. J. Church P.O. Box 1226 Bonita, CA 91908-1226**