

APPLICATION FOR ADMISSION FOR THE 2022– 2023 SCHOOL YEAR

Please complete both sides of this form and review the enclosed checklist of materials and deadlines to ensure a complete application.

Child's Full Name _____

Child's Hebrew Name (if they have already been given one) _____

Child's Home Address _____

City _____ State _____ Zip _____

Date of Birth ____ / ____ / ____ Place of Birth (city, state) _____

Gender Identity _____ Current age _____ Current grade _____

Name & Address of Current School _____

Parent/Guardian Name _____

Parent/Guardian Name _____

Relationship to Student _____

Relationship to Student _____

Home Address _____

Home Address _____

(if different than above)

(if different than above)

City, State, Zip _____

City, State, Zip _____

Home Phone _____

Home Phone _____

Mobile Phone _____

Mobile Phone _____

Email _____

Email _____

Occupation _____

Occupation _____

Employer _____

Employer _____

Work phone _____

Work phone _____

Religion _____

Religion _____

Names and ages of child's siblings _____

Are you a member of a congregation? ____ No ____ Yes; Name and Location: _____

List community affiliations, activities, groups you/your family is involved with _____

How did you learn about Lander~Grinspoon Academy? _____

APPLICATION FEE

A \$55 non-refundable fee (*check made payable to Lander-Grinspoon Academy*) is required to initiate the application process. Please submit payment with this completed application. Check # _____.

I plan on applying for financial aid ____ No ____ Yes

I authorize Lander~Grinspoon Academy to discuss my child with the appropriate teacher at his/her current school or daycare. All information in this application will remain confidential.

Parent Signature _____ **Date** _____

Application for Admission (cont'd)

What are the reasons you feel that Lander-Grinspoon Academy would be a good fit for your child and your family?

Please describe your child's unique qualities, current interests, and activities. _____

Please tell us about activities your child dislikes, avoids or is bored by. _____

Are there any special issues of which the school should be aware (academic, medical, physical, emotional, family life)?

Is your child currently receiving or has your child ever received any special services? (if yes, briefly describe)
Has your child ever had any formal assessments? (if yes, briefly describe)

Briefly describe your family's Jewish life (i.e. home observances, synagogue affiliation, connection to Israel, etc.).

Are there any particular questions that come to mind when considering an LGA education for your child and/or your family?

Please describe your child's experience of the COVID pandemic, and how it has impacted them.

Briefly include any other information about your child that is important for us to know at this time.

Does your child receive PJ Library Books? ____ Yes ____ No _____ I am interested in receiving PJ Library Books.