



# THE GILLISPIE SCHOOL

## KINDERGARTEN-GRADE 6 ADMISSIONS APPLICATION

*In blue or black ink, please complete both sides of this form with the information you would like listed in our records.*

Child's Name \_\_\_\_\_  
*First Middle Last Nickname*

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_  Male  Female Social Security # \_\_\_\_\_

***Please indicate academic year and grade for which your child is applying:***

For the year beginning September 20\_\_\_\_

Kindergarten  Grade 1  Grade 2  Grade 3  Grade 4  Grade 5  Grade 6

Current School \_\_\_\_\_ Grade \_\_\_\_\_

City/State \_\_\_\_\_

May we request transcripts/recommendations from your child's current school?  Yes  No

Referred by \_\_\_\_\_

Friends and/or relatives who attend or have attended Gillispie \_\_\_\_\_

**PARENT/GUARDIAN 1**  Mr.  Mrs.  Ms.  Dr.  Other \_\_\_\_\_

Name \_\_\_\_\_

*First Middle Last*

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Name of Firm \_\_\_\_\_

Firm Description/Specialty \_\_\_\_\_

**PARENT/GUARDIAN 2**  Mr.  Mrs.  Ms.  Dr.  Other \_\_\_\_\_

Name \_\_\_\_\_

*First Middle Last*

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Name of Firm \_\_\_\_\_

Firm Description/Specialty \_\_\_\_\_

SIBLINGS

Name \_\_\_\_\_  M  F Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_  M  F Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_  M  F Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

What do you enjoy most about your child?

How do you imagine your child as a Grade 6 graduate?

Grades 2-6 only: What do you see as your child’s academic areas of strength and areas of challenge?

Is there anything else you would like us to know about your child?

To help us connect names and faces, please attach a recent family photograph.

\_\_\_\_\_ This form and a non-refundable application fee of \$125 are required before an assessment interview will be scheduled. Applications are due on February 1; applications received after that date will be considered if space becomes available.

**Financial Assistance:** The Gillispie School provides a need-based financial assistance program. Admission to the School is not affected by a request for financial assistance. To receive more information and an application for financial assistance, please call Linda Moyer, Admissions Coordinator, at (858) 459-3773 ext. 135.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*To learn more about The Gillispie School, please visit [www.gillispie.org](http://www.gillispie.org).*