



APPLICATION FOR ADMISSION GRADES 2 - 5

Please attach
a recent photo
here

7100 Davis Boulevard
Naples, FL 34104

239.793.1986
Facsimile: 239.793.1460
www.seacrest.org

To be completed by the parent/guardian and submitted to the Admission Officer.
A nonrefundable application fee of \$75.00 must be submitted with each
application. Checks should be made payable to Seacrest School.

APPLICANT INFORMATION

Date application submitted: _____ Campus tour date: _____

Last Name _____ First _____ Middle _____

Preferred name _____ Gender: Female Male Date of birth _____

City/State/Country of birth _____ Citizen of _____

First language _____ Languages spoken at home _____

Home Address _____ Telephone _____

City _____ State _____ Zip _____ Country _____

Grade of proposed entry to Seacrest _____ Year of proposed entry _____ Present grade _____

FAMILY INFORMATION

Parent 1

Parent 2

Relationship to applicant _____

Name _____

Address (if different from applicant) _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Occupation/Title _____

Company Name _____

Business Address _____

Business Telephone _____

Preferred e-mail _____

Relationship to applicant _____

Name _____

Address (if different from applicant) _____

City _____ State _____ Zip _____

Home Phone _____ Cell _____

Occupation/Title _____

Company Name _____

Business Address _____

Business Telephone _____

Preferred e-mail _____

Parents are married divorced other

Applicant lives with parent 1 parent 2 both

If parents are not living together, to whom should correspondence be sent? parent 1 parent 2 both

Siblings (names and ages): _____

Applicant's Present School _____ Dates Attended _____

School Address _____ City _____ State _____ Zip _____

Telephone _____ Principal/Head _____

Please list the name of a current teacher from whom you will request a reference. _____

Please list other schools attended during the last two years:

School	Address	Phone	Dates Attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Names and addresses of two credit references (bank, employer, credit card, etc.)

Have you read the philosophy of Seacrest Country Day School? _____

Does this philosophy agree with your personal values? _____

Seacrest Country Day School admits students of any race, color, religion, disability, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, religion, disability, age, sex, national or ethnic origin in administration of its educational policies, admissions and employment policies, scholarship and loan programs, and athletic and other school administered programs.

Parents are required to respond to the following ten questions. Please share your insights and expectations and attach additional sheets, if necessary.

1. What are your child's interests? _____

2. What do you consider to be your child's academic strengths? _____

Personal strengths? _____

3. What do you consider to be your child's academic weaknesses? _____

Personal weaknesses? _____

4. What do you most want for your child in life? _____

5. Why do you think Seacrest Country Day School might be a good match for your child? _____

6. How would you summarize your expectations of Seacrest Country Day School for your child? _____

7. In what clubs, teams, or other group activities is your child involved, and to what extent? _____

8. What do you find are the challenging aspects of your child? _____

9. What do you find are the rewarding aspects of your child? _____

10. How would you describe your relationship with your child? _____

NOTE: NO CHILD IS ACCEPTED WITHOUT A PERSONAL INTERVIEW AND SCREENING. Admission is based on the completed application, individual testing, applicant's visit to the school, review of recommendations and scholastic records.

Signed: _____

A non-refundable fee of \$75.00 is required when returning an application.

