



Village Schoolhouse Academy

Application for Enrollment

Child's Name: _____ Birthdate: _____ Age: _____

Parent's Names: _____ Phone: _____

Home Address: _____ City: _____ Zip: _____

Cell # Mom: _____ Dad: _____ Wk #: _____

Emergency Contact: _____ Phone: _____

Relationship to Your Child? _____

Who may we thank for referring you to VSH? _____

What kind of previous educational experiences has your child had?

What best describes your child? (circle) Shy Outgoing Cautious Energetic Curious. Why do you think The Village Schoolhouse is a good match for your child and your family?

Does your child have any allergies/health/developmental concerns that we should be aware of? If so, what are they?

Please list the names and ages of siblings or anyone else living in your home:

What should we know about your child that will help us make her/him most comfortable and secure at school?

What are some hobbies your family enjoys together?

What kind of talents or hobbies are you interested in sharing? _____

What kind of things is your child particularly 'passionate' about?

What are your hopes for your child's experience at The Village Schoolhouse?

Can we reach you by e-mail? _____ At? _____

Parent Signature _____ Date: _____

Application Accepted? _____ Date: _____ Initial: _____

The Village Schoolhouse Academy admits students of any race, color, national and 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, national and ethnic origin in administration of its educational policies and admissions policies.

Reg. Fee _____ Curr/Book Deposit _____