



Application for Middle School Admission

Today's Date ____ / ____ / 20 ____

Applying for Grade _____

Child's Name _____
First Last Nickname

Date of Birth ____ / ____ / 20 ____ Present Age ____ Gender M F Other

Street _____

City _____ State ____ Zip _____

Current and Previous Schools

School	Location	Dates

Parent / Guardian

Name _____

Phone _____ Work _____ Cell _____

Occupation _____ Email _____

Address (if different from child's)

Street _____

City _____ State _____ Zip _____

Parent / Guardian

Name _____

Phone _____ Work _____ Cell _____

Occupation _____ Email _____

Address (if different from child's)

Street _____

City _____ State _____ Zip _____

Parent / Guardian

Name _____

Phone _____ Work _____ Cell _____

Occupation _____ Email _____

Address (if different from child's)

Street _____

City _____ State _____ Zip _____

Siblings

Name	Birthday	Present School

For the following prompts, please:

- Write your responses in the spaces provided.
or
- Write/type responses on separate pages, and enclose with application.

How did you hear about the Alta Vista School?

What influenced your decision to apply to the Alta Vista School?

Tell us about your child, and why you think s/he would thrive in the Alta Vista School learning environment.

Is there any additional information about your child (medical, behavioral) that you would like to share with us?

Voluntary Information

The Alta Vista School strives to create a diverse community of students, families, and faculty. The following questions are *optional*.

Child's Birthplace _____ Primary Language _____

Other Language(s) _____

Racial/Ethnic Background _____

We invite you to share with us the other schools to which your child is currently applying, below.

School	Location

Please submit the following (7) materials, as an addendum to this application:

- | | |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Recent photograph of your child | <input type="checkbox"/> Common Confidential Student Evaluation Form
<i>(submitted by current school)</i> |
| <input type="checkbox"/> Record release form | <input type="checkbox"/> Student transcript |
| <input type="checkbox"/> \$100 application fee | |

The following recent work samples will give us a better understanding of your child's current academic exposure and experience:

- | | |
|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Recent writing sample, as submitted to his/her current school | <input type="checkbox"/> Recent math sample (test or assignment), as completed at his/her current school |
|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|

Signature of Parent / Guardian _____

Thank you for your interest in the Alta Vista School!

Please submit this completed application and corresponding materials by:

- Scanning them and sending them as digital files to:
MSAdmissions@altavistaschoolsf.org
or
- Faxing them to:
(415) 520-5242
or
- Mailing them to:
Alta Vista School Admissions / 450 Somerset Street / San Francisco, CA 94134

If you have any questions, please contact us:

- MSAdmissions@altavistaschoolsf.org
- (415) 467-3700

The Alta Vista School does not discriminate on the basis of race, color, national origin, ethnic origin, religion, gender, lifestyle, sexual orientation, disability, or age in the administration of its educational policies, admission policies, financial aid, athletic and other school-administered programs, hiring practices, privileges, programs, and activities generally accorded or made available to students, parents, and employees of the school.

