



**Student Applicant Information**

Name \_\_\_\_\_ Gender \_\_\_\_\_  
*First Middle Last*

Birth date \_\_\_\_\_ Proposed Date of Entrance \_\_\_\_\_

**Parent/Guardian Information**

Name \_\_\_\_\_  
*First Middle Last*

Relationship to Applicant \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_  
*City, State & Zip*

Phone *Home* \_\_\_\_\_ *Work* \_\_\_\_\_ *Mobile* \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Name \_\_\_\_\_  
*First Middle Last*

Relationship to Applicant \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_  
*City State & Zip*

Phone *Home* \_\_\_\_\_ *Work* \_\_\_\_\_ *Mobile* \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Names of Brothers/Sisters	Birth date	School presently attending
_____	_____	_____
_____	_____	_____
_____	_____	_____

With whom does the child live? (*Please give name and relationship to the student of all adults in the household*)  
\_\_\_\_\_  
\_\_\_\_\_

## Student Applicant Educational Information

Previous Day Care / Preschool / Play group Experiences \_\_\_\_\_

\_\_\_\_\_

Why are you considering Waldorf Education for your child at this time? \_\_\_\_\_

\_\_\_\_\_

What would you like your child to receive from his/her experience at Whatcom Hills Waldorf School? \_\_\_\_\_

\_\_\_\_\_

How would you describe your child in regard to their interests, personality, hobbies, likes, dislikes, favorite activities, toys, sports programs, etc.? \_\_\_\_\_

\_\_\_\_\_

Is your child weaned from a bottle or breast feeding? \_\_\_\_\_

What role does electronic entertainment (TV, video games, movies, computer use, etc.) play in your child's life?

Is your child toilet trained and comfortable using a toilet away from home? \_\_\_\_\_

Does your child have any health concerns the school should be aware of? *(Include any allergies: environmental, dietary, animal, plant, bee stings, etc.)* \_\_\_\_\_

\_\_\_\_\_

Therapies *(physical or psychological)* \_\_\_\_\_

Medications \_\_\_\_\_

Is your family settled in the Bellingham/Whatcom County area? If not, are you planning to be?

\_\_\_\_\_

How did you learn about Whatcom Hills Waldorf School? \_\_\_\_\_

Signature of Parent/Guardian

Date

**Please return this form with a \$50 (\$35 for siblings) non-refundable application fee to:  
Whatcom Hills Waldorf School , 941 Austin St., Bellingham, WA 98229 (360) 733-3164**