

Application for Enrollment

If you have any questions, please call us at 703 978-7208, we will be very pleased to help.

Please return completed application to:

Admissions Office
The GW Community School
9001 Braddock Road
Springfield, VA 22151

1a. _____
Application date ▲

1b. _____
Desired start date ▲

Mother or Guardian

3a. _____
First name ▲ Middle initial ▲ Last name

3b. _____
Home address ▲

3c. _____
City ▲ State ▲ Zip

3d. _____
Email address ▲

3e. _____
Home telephone ▲ Fax

3f. _____
Mobile telephone ▲ Pager

3g. _____
Employer ▲

3h. _____
Title, profession, or position ▲

3i. _____
Work address ▲

3j. _____
City ▲ State ▲ Zip

3k. _____
Work telephone ▲ Fax

2a. _____
First name ▲ Middle initial ▲ Last name

2b. _____
Birth date ▲ Age

2c. _____
Preferred name or nickname, if any ▲

2d. _____
Address ▲

2e. _____
City ▲ State ▲ Zip

2f. _____
Cell Phone ▲

2g. _____
Email address, if available ▲

2h. _____
Place of birth ▲

2i. _____
Primary language spoken, if other than English ▲

Father or Guardian

4a. _____
First name ▲ Middle initial ▲ Last name

4b. _____
Home address ▲

4c. _____
City ▲ State ▲ Zip

4d. _____
Email address ▲

4e. _____
Home telephone ▲ Fax

4f. _____
Mobile telephone ▲ Pager

4g. _____
Employer ▲

4h. _____
Title, profession, or position ▲

4i. _____
Work address ▲

4j. _____
City ▲ State ▲ Zip

4k. _____
Work telephone ▲ Fax

Family

5a. Married Divorced Father remarried
 Separated Mother remarried

Parent's marital status, check all that apply ▲

5b. _____
Stepparent name ▲

5c. _____
Stepparent name ▲

5d. _____

Brothers and sisters ▲ Ages ▲ Name of school ▲

Schools

6a. _____
Current grade ▲

6b. _____
Current or last school attended ▲

6c. _____
Location ▲

6d. _____
Dates in attendance ▲ Grades ▲

6e. _____
List grades repeated, if any ▲

6f. _____
If not currently attending school, state reason ▲

6g. _____

List student's last successfully completed course load or current course load ▲

6h. _____

Other schools attended in last three years ▲

6i. _____
Reason for leaving last school ▲

Medical

If the student has experienced physical or emotional problems that have necessitated the use of medication or therapeutic intervention, it is imperative that this be indicated at the time of application. This information will allow us to address the student's needs more effectively.

List any ongoing medical conditions ▲

7a. _____

List any limitations that would prevent full participation in school ▲

7b. _____

List any medications taken regularly, dosage, and times ▲

7c. _____

List the condition(s) that these medications are treating ▲

7d. _____
Who prescribed the medication? ▲

Please use this space to give us more information about your student's strengths and weaknesses.

8a. Yes No

Has the student been identified as gifted?

8b.

Please list any Gifted or Advanced Placement classes taken by student and grade level of class. ▲

8c. Yes No

Has the student been identified with specific learning disabilities or ADHD? ▲

8d.

Please describe. ▲

8e.

Please list the name, address, and phone number of any doctor or consultant who has tested the student for learning disabilities, giftedness, or any other educational diagnostic testing. ▲

8e. Yes No

Has student ever had behavioral problems or used drugs or alcohol? ▲

8f.

8g

If 8e above is answered yes, please provide information about behavior and treatment ▲

Your Perspective

The information you provide in this section will assist us in obtaining your perspective of the strengths and needs of your child. Feel free to use additional paper as necessary.

9a.

Write a brief description of your child ▲

9b.

What are your child's chief strengths? ▲

9c.

What are your child's interests and hobbies? ▲

Your Perspective

9d.

What is your child's area of greatest need? ▲

9e.

In what ways do you expect our school to help your child? ▲

9f.

What do you see your child doing after high school? ▲

Please attach a recent writing sample and additional information that may be helpful to the Admissions Committee.

Photograph

Please attach a recent photograph of the student here.

Application Statement

I hereby apply to The GW Community School for my child, and acknowledge that the information provided on this application is complete and correct.

Enclosed is a non-refundable application fee of \$85.

Also enclosed are transcript request and information release forms for each of the schools and service providers we listed in the application.

Parent or guardian ▲

Parent or guardian ▲

Thank you for applying to The GW Community School. We will give your application a complete and thoughtful review, and may be in touch with you and any service providers you listed during the process. We will communicate with you immediately after the review process is complete.

Upon acceptance, you will receive an Enrollment Packet and a contract. Please return the signed contract with the Registration Fee as soon as possible. We cannot assure you of space for your student until the contract and Registration fee are received.

One last question:

10.

How did you find out about our school? ▲