



Application for Admission Grades 9-12

Oakwood Friends School is committed to a diverse community. Accordingly, we encourage and welcome applications from students of all racial, ethnic, religious and socioeconomic backgrounds. Admissions decisions are made on the basis of an applicant's strengths, talents and potential to succeed academically and contribute positively to the community.

PLEASE TYPE OR PRINT (BOTH SIDES)

- 1. Fill in all sections and sign the Application, return with a \$40.00 application fee to the Admissions Office.
2. Give 'Transcript and Testing Release Form' to current and past schools. Oakwood Friends requires a minimum of two years of previous academic records, plus year to date.
3. Give your current Math and English teachers your Oakwood Friends School's confidential forms and ask them to return the completed forms directly to us.
4. Give the confidential Personal recommendation to an adult who knows you well and ask that person to return the completed form directly to us.
5. Attach a recent graded essay from an English or History class.
6. An on-campus visit and interview are required. You will be asked to write an essay addressing a life experience when you interview.

Mail to:

Oakwood Friends School
Office of Admissions
22 Spackenkil Road
Poughkeepsie, NY 12603
Phone: (845) 462-4200
Admissions: (800) 843-3341
Fax: (845) 462-4251
E-mail: admissions@oakwoodfriends.org

Date _____

I. Student Information

Name, Preferred Nickname, Address, City, State, Zip, Country, Telephone, Fax, E-mail, City/State of Birth, Gender, Date of Birth, For Grade, For Academic Year, Applying as, Applicant lives with, Correspondence to.

II. Parent/Guardian Information

Mother or Female Guardian

Name, Address, City, State, Zip, Country, Phone (H), Phone (W), Fax, E-mail, Occupation, Employer

Father or Male Guardian

Name, Address, City, State, Zip, Country, Phone (H), Phone (W), Fax, E-mail, Occupation, Employer

III. Current or Previous Schools

Present School _____	Previous School _____
Grades Attended _____	Grades Attended _____
Address _____	Address _____
Phone _____	Phone _____

IV. Family Information

Children in family (other than applicant)

Name _____	Age _____	Present School _____
Name _____	Age _____	Present School _____
Name _____	Age _____	Present School _____

Grandparent Information

Name _____ Maternal Paternal

Address (Street, City, State, Zip, Country) _____

Name _____ Maternal Paternal

Address (Street, City, State, Zip, Country) _____

If members of the Society of Friends, please give name of Monthly Meeting _____

Is either parent an alumnus/a of Oakwood Friends School? Yes, Class of _____ No

How did you hear of Oakwood Friends? _____

V. Medical Information

Is applicant currently undergoing any medical treatment? Yes No

Is the applicant currently taking any medication? Yes No

Does the applicant have any diagnosed learning differences? Yes No

Has the applicant undergone any educational testing within the last two years? Yes No

Has the applicant ever undergone psychological testing? Yes No

Are the applicant's physical activities restricted? Yes No

Has the applicant had professional counseling with a counselor, psychiatrist, psychologist, or family doctor within the last two years? Yes No

Has the applicant attended a treatment program of any type within the last two years? (including drug, alcohol, tobacco, emotional) Yes No

If the answer is "Yes" to any of the above, please give us a full explanation on a separate sheet. Include dates, reports, and names and phone numbers of professionals.

Candidates for the Learning Skills program must submit a Psychoeducational Report done within the last two years.

Parent/Guardian Certification

I/We certify that no information concerning the health of this applicant has been withheld or misrepresented.

Signature _____ Date _____
(Parent/Guardian)

Signature _____ Date _____
(Student Applicant)

Non-refundable \$40.00 application fee enclosed with this form.

