

River Rock School

252 Upper Main Street

Montpelier, VT 05602

802-223-4700

riverrockschool@comcast.net

www.riverrockschool.org



Date of Application _____ For Academic Year _____

Student's Name _____ Gender _____

Date of Birth _____ Age as of October 1st of year of entrance _____

Current School _____ Current Grade _____

Please indicate program for which you are applying:

_____ Elementary Programs, Grades K-8 (8:30-3:00)

_____ After-school Program (3:00-5:30)

_____ M _____ Tu _____ W _____ Th _____ F

Parent/Guardian _____ Parent/Guardian _____

Address _____ Address _____

City/St/Zip _____ City/St/Zip _____

Occupation _____ Occupation _____

Home Phone _____ Home Phone _____

Work Phone _____ Work Phone _____

Cell Phone _____ Cell Phone _____

Email _____ Email _____

Student lives with: _____

Other significant relationship Name: _____ Role _____

SIBLINGS: NAMES

AGE

NAME OF SCHOOL

1. _____

2. _____

3. _____

1. How did you hear about the River Rock School? _____

2. What are your educational goals for your child? _____

3. Explain why you are considering River Rock School for your child:

4. How does your child spend his/her free time? Please describe your child's special interests: _____

5. Is there anything that we should know about your child's learning style that would help us serve his/her specific needs? _____

6. Explain, if necessary, any significant events/factors which have affected your child's life:

7. Please describe how your child responds to adults and other children:

8. Does your child have any special needs or considerations? (health, behavioral, social, physical, etc.) _____

9. Please provide any dietary restrictions for your child: _____

10. Please provide any additional information that would assist us in knowing your child more fully:

11. Which activities can we expect your family to volunteer for (committees, board, fundraising, building upkeep & maintenance, field trips, special projects with students during school, marketing & advertisement, substitute teaching for school or afterschool)? _____

Do you need information regarding our scholarship program? _____ Yes _____ No

Please return this form with:

- a. A non-refundable \$25 application fee per child
- b. A recent 2" x 3" photograph of your child (optional)

All information provided is confidential and is used for enrollment purposes only.

SIGNED: _____ DATE: _____

The River Rock School welcomes diversity among students and staff, and does not discriminate on the basis of race, color, or national and ethnic origin in its admission or hiring policies, tuition assistance decisions, or any other aspect of its educational program.

OFFICE USE ONLY:	APPLICATION/FEE Rec'd _____	PHOTO Rec'd _____
OBSERVATION/INTERVIEW _____	ENROLLED _____	FINANCIAL AID _____
NOTES:	_____	_____
_____	_____	_____