



Admission Application

Applicant and Family Information

Preschool (3 years old by Sept. 1st)

Please write neatly or type.

Applicant's Personal Data:

Legal name _____
First Middle Last Jr.

Please attach applicant's photo here (optional).

Preferred name _____

Gender Male Female **Age** _____ **Date of birth (mm/dd/yy)** _____

Current Grade _____ **Applying to Grade** _____

Home Address _____
Number and Street Apartment #

City State Zip

Home Phone (_____) _____ **Preferred email** _____

Ethnicity (optional)

African American or Black Asian Latino/Hispanic Middle Eastern Multiracial
 Native American or Alaska Native White Native Hawaiian or other Pacific Islander

What language(s) does the applicant speak at home? _____

Has the applicant previously applied to The Guthrie School? YES NO

Applicant's Family Data:

Parent/Guardian **Dr.** **Mr.** **Mrs.** **Ms.**

First Middle Last

Home address same as applicant

Number and Street Apt #

City State Zip

Preferred contact number: home work cell

Home phone (_____) _____

Work phone (_____) _____

Cell phone (_____) _____

Email _____

Occupation/Industry _____

Job Title _____

Employer _____

Stepparent Name _____
Title First Middle Last

Parent/Guardian **Dr.** **Mr.** **Mrs.** **Ms.**

First Middle Last

Home address same as applicant

Number and Street Apt #

City State Zip

Preferred contact number: home work cell

Home phone (_____) _____

Work phone (_____) _____

Cell phone (_____) _____

Email _____

Occupation/Industry _____

Job Title _____

Employer _____

Stepparent Name _____
Title First Middle Last

Cell phone (_____) _____

Cell phone (_____) _____

Occupation/Industry _____

Occupation/Industry _____

Employer _____

Employer _____

Check if appropriate: Father is deceased Mother is deceased Parents are separated Parents are divorced Other: _____

Other children in applicant's family (please give names, ages, grades and schools if in school or college):

_____	_____	_____	_____	Applying to Guthrie?	_____ YES	_____ NO
Name	Age	Grade	School			

_____	_____	_____	_____	Applying to Guthrie?	_____ YES	_____ NO
Name	Age	Grade	School			

_____	_____	_____	_____	Applying to Guthrie?	_____ YES	_____ NO
Name	Age	Grade	School			

Applicant's relatives who currently attend or have graduated from The Guthrie School:

_____	_____	_____	_____
Name	Relationship to student	Year(s) attended	Year graduated

_____	_____	_____	_____
Name	Relationship to student	Year(s) attended	Year graduated

_____	_____	_____	_____
Name	Relationship to student	Year(s) attended	Year graduated

Confidentiality Policy and Access Waiver

I acknowledge that I waive my right of access to confidential information in my child's admission file. This includes but is not limited to, teacher evaluation forms, letters of reference, assessment information and documentation such as interview findings and evaluations, The Guthrie School visit evaluations, and any additional testing results.

I understand that withholding or misrepresenting information requested in this application will disqualify our application to The Guthrie School. The signature(s) below affirm that all of the information contained in this application is correct, complete and honestly presented.

Parent or Guardian Signature

Date

It is the policy of The Guthrie School to administer its educational programs, including admission, without regard to race, color, religion, sex, sexual orientation, national or ethnic origin, or disability.

THE GUTHRIE SCHOOL

598 Old Custer Road, Allen, TX 75013 - Admission Office 972.596.6929 – www.guthrieschool.com

Testing Registration Pre-K-Sixth Grade



Applicant's full name _____ Applying to grade _____

Date of Birth _____ FIRST _____ MIDDLE _____ LAST _____
MONTH DAY YEAR Current grade _____

Does your child have any food allergies? _____ YES _____ NO

If yes, please specify _____

Parent/Guardian Name _____ Phone (_____) _____
FIRST LAST

Email Address: _____

Part I- Achievement Testing (Kindergarten-5th grade)

Each applicant will take an in-house achievement test at The Guthrie School. Appointments are scheduled with the Admission Office. Parents should plan on their student spending approximately 2-2 ½ hours at The Guthrie School.

Part II- Individual Visit (Pre-K -5th grade) *Optional*

Applicants applying to grades K-5 are encouraged to schedule a half-day visit during which they will have an opportunity to "shadow" a Guthrie student through his/her classes. Once the Testing Registration and Application have been received, the Office of Admissions will contact you to set up a visitation date.

Should you not be able to attend your testing date, please contact The Guthrie School at 972-596-6929
mary.heartly@guthrieschool.com as soon as possible to reschedule.

Parent's/Guardian's Signature _____ Date _____

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