

Date App. Recd. _____
Fees Paid _____
Date Paid _____
Check No. _____
Date of Entry _____
Teacher _____

Interview _____
Date _____
SS. verified _____
Birth Cert. _____
Date of Withdrawal _____



2017 – 2018 APPLICATION FOR REGISTRATION

New Student

Name of Student _____
(First) (Middle) (Last)

Date of Birth _____ Female ___ Male ___ Age on Sept. 1, 2017 _____
(Month) (Day) (Year)

Home Address _____ City _____ Zip _____ Phone _____

Father's Name _____ Cell# _____ e-mail _____

Father's Address (if different) _____ City _____ Zip _____ Phone _____

Father's Occupation _____ Employer _____

Father's Business Address _____ City _____ Zip _____ Phone _____

Mother's Name _____ Cell # _____ e-mail _____

Mother's Address (if different) _____ City _____ Zip _____ Phone _____

Mother's Occupation _____ Employer _____

Mother's Business Address _____ City _____ Zip _____ Phone _____

Person Responsible for Tuition Payments: Print _____ Signature _____

Address (if not stated above) _____ City _____ Zip _____ Phone _____

Physician's Name _____

Physician's Address _____ City _____ Zip _____ Phone _____

How did you learn of Discovery School? _____

NAME OF STUDENT _____

Schools Previously Attended _____ Address: _____ Dates: _____

_____ Address: _____ Dates: _____

Reason for leaving previous school: _____

SCHOOL YEAR: ___ 2016-2017 ___ 2017-2018

TODDLER PROGRAM Ages 18 months - 3 years: Indicate class choice

___ 8:30 a.m. - 11:30 a.m.
Monday - Friday
Half Day Class

___ 8:30 a.m. - 3:00 p.m.
Monday - Friday
Full Day Class

___ 7:15 a.m. - 5:30 p.m.
Monday - Friday
Extended Day Class

EARLY CHILDHOOD PROGRAM Ages 2 1/2 - 6 years: Indicate class choice

___ 8:15 a.m. - 11:30 a.m.
Monday - Friday
Half Day Class Ages 2 ½-4

___ 8:15 a.m. - 3:30 p.m.
Monday - Friday
Full Day Class: Ages 2 ½ -6

___ 7:15 a.m. - 5:30 p.m.
Monday - Friday
Extended Day Class: Ages 2 ½-6

LOWER ELEMENTARY AND UPPER ELEMENTARY:

Please submit school records (transcript, report cards, progress reports, test results,) for the last two years with applications for elementary.

___1st ___2nd ___3rd grades (*ages 6-9*) ___8:15 a.m. - 3:40 p.m. Full Day **or** ___7:15 a.m. - 5:30 p.m. Extended Day

___4th ___5th ___6th grades (*ages 9-12*) ___8:15 a.m. - 3:40 p.m. Full Day **or** ___7:15 a.m. - 5:30 p.m. Extended Day

(Please read and sign page 4; return with application)

**The Discovery School
Founded in 1974**

Accredited By:

Southern Association of Colleges and Schools (SACS)
American Montessori Society (AMS)
Associate Member School
International Montessori Council (IMC)
Member School
Texas Private School Accreditation Commission (TEPSAC)
Texas Private Schools Association (TPSA)

A Texas Non-profit Corporation
(I.R.C. Section 501 (c)(3) Organization)

All students regardless of color, creed and national or ethnic origin are eligible for enrollment at Discovery School.

NAME OF STUDENT _____

(Please check all that apply)

Student lives with: Father__ Mother__ Stepfather__ Stepmother__ Guardian_____

Release information to: Father__ Mother__ Stepfather__ Stepmother__ Guardian_____

<i>Siblings:</i>	<i>Name</i>	<i>Age</i>
	_____	_____
	_____	_____
	_____	_____
	_____	_____

General Information

General Health of Student_____

Physical Limitations_____

Has your student ever been double promoted? No__ Yes__ What Grade?_____

Has your student ever repeated a grade? No__ Yes__ What Grade?_____

Has your student been in advanced classes? No__ Yes__ What Grades & Curriculums?_____

Does your student have any academic challenges? No__ Yes__
*What areas?*_____

Has additional special testing or tutoring been indicated at any point in school? No__ Yes__ What Grade?_____
*What areas?*_____

Does your student have any clinically diagnosed learning differences? No__ Yes__
*What diagnosis and when diagnosed?*_____

Has your student ever been dismissed from school for any reason? No__ Yes__
If yes, please explain, including name of school and principal _____

Has your student ever had any psychological counseling? No__ Yes__
If yes, please explain on a separate sheet of paper, which will NOT become part of the student's permanent record.

Please use the space below for any other pertinent information about the student or family situation (optional)
