

APPLICATION FORM

This application should be completed by the parent/guardian of the applicant. An application fee of \$50 (\$100 for international applicants) should accompany this form. The reviews, current transcripts, and educational testing (when required) should be sent directly to the Admissions Office. RECENT PHOTO REQUESTED.

APPLICANT INFORMATION

Full name _____ Preferred Name _____
Date of birth ___/___/___ Social Security Number _____ - _____ - _____
Grade applying for _____ Current grade _____ Month/Year of proposed entrance _____
Mailing address _____
City _____ State _____ ZIP _____ Country _____
Home telephone number (_____) _____ - _____ Height _____ Weight _____ Citizenship _____

FAMILY INFORMATION (to be completed by parents/guardian)

PARENT/GUARDIAN

Full name _____ Relation _____
Address _____
City _____ State _____ ZIP _____ Country _____
Occupation/Title _____ Name of business _____
Home phone (_____) _____ - _____ Work phone (_____) _____ - _____ FAX (_____) _____ - _____
E-Mail Address _____

3

PARENT/GUARDIAN

Full name _____ Relation _____
Address _____
City _____ State _____ ZIP _____ Country _____
Occupation/Title _____ Name of business _____
Home phone (_____) _____ - _____ Work phone (_____) _____ - _____ FAX (_____) _____ - _____
E-Mail Address _____

Applicant lives with:

Check if appropriate:

- | | | | | |
|---|-------------------------------------|---------------------------------|---|--|
| <input type="checkbox"/> Mother and Father | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Father is deceased | <input type="checkbox"/> Parents are divorced |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Stepfather | | <input type="checkbox"/> Mother is deceased | <input type="checkbox"/> Parents are separated |
| <input type="checkbox"/> Other (explain): _____ | | | | |

If parents are divorced or separated, who has legal custody of the applicant? _____

A copy of legal custody papers should be submitted if applicable.

To whom should correspondence be sent? _____

First language, other than English _____

Declaration of ethnicity (Optional) _____

Information about brothers and sisters

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

PRESENT SCHOOL

School name _____ Independent Parochial Public Dates of attendance _____

Address _____

City _____ State _____ ZIP _____ Country _____

Head or Counselor _____ Phone (_____) _____ - _____ FAX (_____) _____ - _____

Other schools attended in the past three years

School name _____ City _____ State _____ Dates of attendance _____

School name _____ City _____ State _____ Dates of attendance _____

How did you learn about Blue Ridge School? Name of contact: _____

Blue Ridge Parent Blue Ridge Alum Friend Publication Educational Consultant School

FINANCIAL RESPONSIBILITY

Full name _____ Relation _____

Address _____

City _____ State _____ ZIP _____ Country _____

Please check here if you intend to apply for financial aid.

4

In submitting information and in signing the application, parents are stating that all information is correct and that there have been no deliberate omissions or misrepresentations. Also, parents agree to communicate to the Admissions Office in writing any changes in matters contained in the application or forms, and understand that upon discovery of any inaccuracy of information or the omission of requested information, Blue Ridge School reserves the right to revoke the admission.

Signature of applicant _____ Date _____

Signature of parent or guardian _____ Date _____

Blue Ridge School admits qualified young men of any race, color, and national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the School. Blue Ridge School does not discriminate on the basis of race, color, or national or ethnic origin in administration of its educational policies, admission policies, financial assistance and loan programs, athletic, and other administered programs.

STUDENT QUESTIONNAIRE

Applicant's name _____ Grade applying for _____
Current school _____ Current grade _____

Using complete sentences, please complete this questionnaire in your best handwriting. Attach additional paper, if necessary.

What academic subjects are of greatest interest to you? Why? _____

What academic subjects are of least interest to you? Why? _____

5

Tell us about any special interests or hobbies you have. _____

Tell us about any sports or activities that you participate in either in school or in your community. _____

ENGLISH TEACHER REVIEW

To the Applicant:

Please type or print your name in the space below and then give this form to your English teacher, along with a stamped envelope addressed to the Blue Ridge School Admissions Office.

Name of student _____ Applicant to grade _____

Signature _____ Date ___/___/___

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential teacher review and the school report for the student listed above.

Name of parent or guardian _____

Signature of parent or guardian _____ Date ___/___/___

To the Teacher:

Blue Ridge School is a college preparatory school for boys in grades nine through twelve. The School caters to young men who respond well to small classes, a structured academic routine, and faculty support. Many students who enter Blue Ridge School have yet to realize their fullest academic potential. These same young men graduate with the skills and the poise necessary for success in college and in life.

The student whose name appears above has applied for admission to Blue Ridge School. Your candid observations will help the Admissions Committee evaluate the appropriateness of Blue Ridge School for the applicant. This review will remain confidential and will not become part of the student's permanent record. Please return your review directly to the School at the address below. Thank you for your help in this important process.

Teacher's name _____ Title _____

School _____

COURSE DESCRIPTION

Title _____

How often does the class meet? _____

Is this course sectioned according to ability? Yes No

If yes, please briefly explain how this course is sectioned and the student's placement _____

What text(s) is(are) used? _____

Please estimate the percentage of time spent in the following areas:

Reading/literature _____% Vocabulary development/spelling _____% Grammar _____% Writing skills _____%

ACADEMIC AND PERSONAL QUALITIES

How long and in what capacity have you known the applicant? _____

What are the first three words that come to mind to describe the applicant?

1. _____ 2. _____ 3. _____

What do you consider to be the applicant's greatest strengths? _____

What do you consider to be the applicant's greatest needs? _____

Please comment on the applicant's approach to school (intellectual curiosity; study habits; perseverance; class participation; initiative and resourcefulness; reaction to advice or criticism). _____

10

Please comment on the applicant's academic skills (reading interest and comprehension; oral and written expression; abstract thinking). _____

Please comment on the applicant's character and personality (integrity; acceptance of responsibilities; maturity; self confidence; sense of humor; warmth of personality). _____

Please comment on the applicant's relationship with others (leadership; rapport with peers, adults, and family). _____

Please comment on any circumstances inside or outside of school that affect the applicant's life at school. _____

If we have any additional questions, may we call you? Yes No

If yes, phone number _____ Most convenient time to call _____

Teacher signature _____ Date ___/___/___

MATH TEACHER REVIEW

To the Applicant:

Please type or print your name in the space below and then give this form to your Mathematics teacher, along with a stamped envelope addressed to the Blue Ridge School Admissions Office.

Name of student _____ Applicant to grade _____

Signature _____ Date ___/___/___

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential teacher review and the school report for the student listed above.

Name of parent or guardian _____

Signature of parent or guardian _____ Date ___/___/___

To the Teacher:

Blue Ridge School is a college preparatory school for boys in grades nine through twelve. The School caters to young men who respond well to small classes, a structured academic routine, and faculty support. Many students who enter Blue Ridge School have yet to realize their fullest academic potential. These same young men graduate with the skills and the poise necessary for success in college and in life.

The student whose name appears above has applied for admission to Blue Ridge School. Your candid observations will help the Admissions Committee evaluate the appropriateness of Blue Ridge School for the applicant. This review will remain confidential and will not become part of the student's permanent record. Please return your review directly to the School at the address below. Thank you for your help in this important process.

Teacher's name _____ Title _____

School _____

COURSE DESCRIPTION

Title _____

How often does the class meet? _____

Is this course sectioned according to ability? Yes No

If yes, please briefly explain how this course is sectioned and the student's placement _____

What text(s) is(are) used? _____

What course would you recommend the student take next? _____

ACADEMIC AND PERSONAL QUALITIES

How long and in what capacity have you known the applicant? _____

What are the first three words that come to mind to describe the applicant?

1. _____ 2. _____ 3. _____

What do you consider to be the applicant's greatest strengths? _____

What do you consider to be the applicant's greatest needs? _____

Please comment on the applicant's approach to school (intellectual curiosity; study habits; perseverance; class participation; initiative and resourcefulness; reaction to advice or criticism). _____

12 Please comment on the applicant's academic skills (computational speed and accuracy; mastery of basic math facts; ability to abstract; problem solving strategies). _____

Please comment on the applicant's character and personality (integrity; acceptance of responsibilities; maturity; self confidence; sense of humor; warmth of personality). _____

Please comment on the applicant's relationship with others (leadership; rapport with peers, adults, and family). _____

Please comment on any circumstances inside or outside of school that affect the applicant's life at school. _____

If we have any additional questions, may we call you? Yes No

If yes, phone number _____ Most convenient time to call _____

Teacher signature _____ Date ___/___/___

PRINCIPAL • HEAD • COUNSELOR REVIEW

To the Applicant:

Please type or print your name in the space below and then give this form to your Principal, Head, or Counselor, along with a stamped envelope addressed to the Blue Ridge School Admissions Office.

Name of student _____ Applicant to grade _____

Signature _____ Date ___/___/___

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential review and the school report for the student listed above.

Name of parent or guardian _____

Signature of parent or guardian _____ Date ___/___/___

To the Principal/Head/Counselor:

Blue Ridge School is a college preparatory school for boys in grades nine through twelve. The School caters to young men who respond well to small classes, a structured academic routine, and faculty support. Many students who enter Blue Ridge School have yet to realize their fullest academic potential. These same young men graduate with the skills and the poise necessary for success in college and in life.

13

The student whose name appears above has applied for admission to Blue Ridge School. Your candid observations will help the Admissions Committee evaluate the appropriateness of Blue Ridge School for the applicant. This review will remain confidential and will not become part of the student's permanent record. Please return your review directly to the School at the address below. Thank you for your help in this important process.

Principal/Head/Counselor's name _____

Title _____ School _____

ACADEMIC AND PERSONAL QUALITIES

How long and in what capacity have you known the applicant? _____

What are the first three words that come to mind to describe the applicant?

1. _____ 2. _____ 3. _____

What do you consider to be the applicant's greatest strengths? _____

What do you consider to be the applicant's greatest needs? _____

Please comment on the applicant's approach to school (intellectual curiosity; study habits; perseverance; class participation; initiative and resourcefulness; reaction to advice or criticism). _____

Please comment on the applicant's academic skills. _____

Please comment on the applicant's character and personality (integrity; acceptance of responsibilities; maturity; self-confidence; sense of humor; warmth of personality). _____

Please comment on the applicant's relationship with others (leadership; rapport with peers, adults, and family). _____

Please comment on any circumstances inside or outside of school that affect the applicant's life at school. _____

14

Please list any special recognitions the applicant has received. _____

Please relate any disciplinary action involving the applicant. _____

Does the applicant have any personal, emotional, or physical difficulties of which the School should be aware? _____

PARENT/SCHOOL RELATIONSHIP

To your knowledge, is the parents' perception of the student consistent with the school's understanding of him?

Always Usually Sometimes Rarely Other _____

Which words best describe the parents in regard to their child?

Overly demanding Appropriate Overly supportive Other _____

If we have any additional questions, may we call you? Yes No

If yes, phone number _____ Most convenient time to call _____

Principal/Head/Counselor signature _____ Date ____/____/____

PERSONAL REVIEW

(COACH, SCOUT LEADER, EMPLOYER, ETC.)



To the Applicant:

Please type or print your name in the space below and then give this form to someone outside your family who knows you well (coach, scout leader, employer, clergy, etc.) along with a stamped envelope addressed to the Blue Ridge School Admissions Office.

Name of student _____ Applicant to grade _____

Signature _____ Date ___/___/___

To the Parent/Guardian:

Please read and sign the statement below.

I acknowledge that I waive my right to read the confidential personal review for the student listed above.

Name of parent or guardian _____

Signature of parent or guardian _____ Date ___/___/___

To the Reviewer:

Blue Ridge School is a college preparatory school for boys in grades nine through twelve. The School caters to young men who respond well to small classes, a structured academic routine, and faculty support. Many students who enter Blue Ridge School have yet to realize their fullest academic potential. These same young men graduate with the skills and the poise necessary for success in college and in life.

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Reviewer's name _____ Title _____

ACADEMIC AND PERSONAL QUALITIES

How long and in what capacity have you known the applicant? _____

What are the first three words that come to mind to describe the applicant?

1. _____ 2. _____ 3. _____

What do you consider to be the applicant's greatest strengths? _____

What do you consider to be the applicant's greatest needs? _____

Please describe the applicant's personal qualities. Comment on his maturity, integrity, concern for others, and sense of humor.

Please describe any characteristics, talents, or skills that the applicant possesses. _____

16

Please relate a story that best illustrates your view of the applicant. _____

In what ways might the applicant benefit from attending Blue Ridge School? _____

Reviewer's signature _____ Date ____/____/____

RELEASE OF TRANSCRIPT AND SCHOOL RECORDS

To the Parent/Guardian:

Please complete this form and submit it to the applicant's current school.

AUTHORIZATION OF RELEASE OF SCHOOL RECORDS TO BLUE RIDGE SCHOOL

In accordance with regulations regarding the privacy rights of parents and students, the undersigned hereby consents to the immediate release to Blue Ridge School of all school records, including official transcripts, current grades in courses, test profiles, and educational/psychological and diagnostic evaluations.

Student _____ Current grade _____
(PRINT) (LAST) (FIRST) (MIDDLE)

Name of school _____

School address _____

City _____ State _____ ZIP _____ Country _____

Telephone (_____) _____ - _____

Signature of parent/legal guardian _____ Date ____/____/____

Signature of student (if 17 or over) _____ Date ____/____/____

17

To Principal/Head/Counselor/Registrar:

The student whose name appears above has applied for admission to Blue Ridge School. We would appreciate your promptly forwarding the following information to the Blue Ridge School Admissions Office:

- *An official transcript of the student's middle school and/or high school academic record to date, including grades for courses in progress and an explanation of your grading scale.*
- *A copy of the student's complete test profile.*
- *All educational/psychological or diagnostic evaluations.*

Please retain this authorization form in the student's file so that additional forms will not be necessary for future information requests from Blue Ridge School.

AN OFFICIAL TRANSCRIPT MUST FOLLOW FAXED COPIES