



*Nourishing the growth of wisdom*

4000 MacGregor Downs Road • Greenville, North Carolina 27834 • Telephone: 252.931.0760 • Facsimile: 252.931.0964

## APPLICATION FOR ADMISSION

Year of proposed entrance: \_\_\_\_\_

Applying for grade: \_\_\_\_\_

### APPLICANT INFORMATION

\_\_\_\_\_  
First Name Middle Name Last Name Preferred Name

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Fax Number Student's Email Address

\_\_\_\_\_  
Date of Birth Social Security Number Present Grade

### FAMILY INFORMATION

#### *Parent Information*

\_\_\_\_\_  
Father's Full Name/Title

\_\_\_\_\_  
Mother's Full Name/Title

\_\_\_\_\_  
Home Address (if different from applicant's)

\_\_\_\_\_  
Home Address (if different from applicant's)

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Occupation/Title

\_\_\_\_\_  
Occupation/Title

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Business Telephone Business Fax

\_\_\_\_\_  
Business Telephone Business Fax

\_\_\_\_\_  
Father's Email Address Father's Cell Phone

\_\_\_\_\_  
Mother's Email Address Mother's Cell Phone

\_\_\_\_\_  
Person(s) financially responsible for tuition

\_\_\_\_\_  
Relationship to applicant





What are the candidate's strengths?

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In what areas does the candidate need growth and development?

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Attitude of parents: (circle one) Cooperative Indifferent Overly Protective Antagonistic other \_\_\_\_\_

Please assess the following personal qualities in comparison to the candidate's peers.

Personal Qualities	Excellent	Good	Fair	Poor
Integrity				
Leadership Potential				
Relationship with Peers				
Relationship with Adults				

Would you like to talk further with someone from the Admission Office?    \_\_\_\_ Yes    \_\_\_\_ No

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone

*Thank you for your prompt attention to this request.*



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RELEASE OF RECORDS  
*To be given to applicant's current school.*

**To Applicant:**

Please have a parent or legal guardian complete and sign this release form. Then give the form to your current head of school or principal.

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Name of Current School

\_\_\_\_\_  
Current Grade Level

I hereby authorize the release to The Oakwood School of all educational records pertaining to the student named above.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

**Registrar:**

Please forward the above-named student's Transcript and test scores

Most recent grades and/or narrative reports

Health / immunization records

Any psychological and/or educational evaluations

Your school's grading scale

**To: Director of Admissions**

The Oakwood School

4000 MacGregor Downs Road

Greenville, North Carolina 27834

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## TEACHER RECOMMENDATION FOR GRADES 4—7

First Name

Middle Name

Last Name

Preferred Name

The above named student is a candidate for admission to The Oakwood School. Please complete this form to help us become better acquainted with the candidate. Your recommendation is confidential. Thank you for your help and assistance.

Academic Ratings	Excellent	Good	Fair	Poor
Academic Ability				
Academic Performance				
Study Habits				
Organization				
Motivation				
Originality				
Potential				
Written Expression				
Oral Expression				

Non-Academic Ratings	Excellent	Good	Fair	Poor
Conduct				
Self-Confidence				
Warmth and Humor				
Honesty				
Concern for Others				
Energy/Initiative				
Maturity				

Please comment on the candidate's strengths and abilities:

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Please comment on the candidate's personality and character:

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Please comment on the candidate's weaknesses and challenges.

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Is there any special interest or talent of which you are aware that would be helpful to us in the evaluation of this candidate?

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Is there any special need, event or family circumstance of which you are aware that would be helpful to us in the evaluation of this candidate?

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Attitude of parents: (circle one) Cooperative Indifferent Overly Protective Antagonistic other \_\_\_\_\_

**ADDITIONAL INFORMATION**

How long have you known the applicant? \_\_\_\_\_ In what capacity have you known the applicant? \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

**CURRENT SCHOOL INFORMATION**

Current School Name \_\_\_\_\_ Contact Individual \_\_\_\_\_

School Address \_\_\_\_\_ School Telephone \_\_\_\_\_

After completing this form, please return it directly to:

**Director of Admissions**  
**The Oakwood School**  
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Greenville, North Carolina 27834  
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