



WALDEN CENTER & SCHOOL
2446 MCKINLEY AVENUE
BERKELEY, CALIFORNIA 94703
510-841-7248

APPLICATION FOR ENROLLMENT

Applying for: academic year 20__-20__

Today's date _____

Lower Group (K)

Lower Middle Group (grade 1)

Middle Group (grade 2 or 3)

Upper Group (grade 4 or 5 or 6)

Child's Name _____ Nickname/Preferred name _____

Birth Date _____ Gender _____

FAMILY INFORMATION

Parent/Guardian

Parent/Guardian (Attach second sheet if more than two)

Name

Name

Relationship to child

Relationship to child

Street address

Street address

City, State, Zip

City, State, Zip

Phone number(s)

Phone number(s)

E-mail

E-mail

Occupation

Occupation

Sibling _____
Name

Age

School (if applicable)

Sibling _____
Name

Age

School (if applicable)

Sibling _____
Name

Age

School (if applicable)

List all current and previous schools: _____

Name of current teacher: _____ Telephone number: _____

How did you hear about Walden? _____

Please respond to the following questions on a separate sheet of paper:

1. Why do you believe Walden is a good match for your child and family? What draws you to our philosophy and program?
2. What are some things that particularly interest your child? What does s/he enjoy doing with friends, with family, and alone?
3. What are your child's strengths and challenges? Please address social, academic, and emotional realms.
4. Education at Walden features mixed-age classrooms, arts-based learning, ongoing informal assessments instead of tests, conferences instead of report cards, and a collective administrative structure. Do you have any questions or concerns about any aspect of Walden that you would like for us to address?
5. If your child is transferring out of another elementary school, please explain.
6. **Has your child had any academic or psychological assessments?** Yes No
If yes, please submit copies with your application.
7. People embody lots of identities. Please tell us about those that are important for your family and child.
8. Is there anything else you would like us to know about your child?

For 2019-20 enrollment: Courtesy due date is Friday, December 21, 2018. Final application due date is Friday, January 18, 2019.

Please mail this completed form, a family photo, and the application fee of \$65.00 (make check out to Walden Foundation) to:

VickiLee Edge
Admissions Coordinator
Walden Center & School
2446 McKinley Avenue
Berkeley, CA 94703

Please be sure to have your child's current teacher mail, e-mail, or fax a copy of the **EBISA teacher recommendation form** directly to the school. A teacher recommendation is a required part of your child's application file and can be downloaded from our website at www.walden-school.net or the EBISA website at www.ebisaca.org. Please be sure to sign the form!

After we receive your application, family photo, application fee, and teacher recommendation form, we will contact you to schedule a child visit. The child visit is an opportunity for us to meet your child and see her/him in a classroom context; we do not test applicants.

If you have any questions you can contact us at admissions@walden-school.net, 510-841-7248, or fax 510-845-4609.

Thank you for your interest in Walden.