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Countryside School

Application for Admission for 2008/2009

Countryside School
4301 W. Kirby Avenue
Champaign, Illinois 61822
• (217) 355-1253 • fax (217) 355-7492

All information provided to the school is strictly confidential
This form is to be completed by a parent or guardian of the applicant. A \$50 non-refundable application fee must be attached. The fee covers processing and screening costs and therefore is not applicable toward tuition.

Applicant

for Grade _____

Boy Girl (please circle)

Full Legal Name _____

Name student prefers (nickname) _____

Date of Birth _____

Age _____

Place of Birth _____

Citizenship _____

Parents

Father's Name (Dr., Mr.)

Mother's Name (Dr., Mrs., Ms.)

Home Address

Home Address

City, State, Zip

City, State, Zip

Home Phone Number _____

Home Phone Number _____

Are parents separated or divorced? _____

If so, with whom is the applicant living? _____

Do you desire correspondence to be mailed to both parents? _____

Father's Employer _____

Mother's Employer _____

Occupation _____

Occupation _____

Business Address _____

Business Address _____

Work Phone Number _____

Work Phone Number _____

Email Address _____

Email Address _____

Please list schools attended by the applicant (begin with current school year)

Who referred you to Countryside or how did you learn about the school? _____

I certify that the information provided on this applicant is true and accurate.

(parent's or guardian's signature)

(date)