

EAGLE SCHOOL APPLICATION

A non-refundable application fee of \$50.00 must accompany this form.

Date of proposed entrance at EAGLE School: _____

Child's full name: _____

Home address: _____

Date of birth: _____ Home Phone: _____

School currently attending: _____ Grade: _____

Address: _____ Telephone: _____

Public School District: ___Madison ___Middleton ___Oregon ___Verona ___Other _____

Name of Parent/Guardian: _____ E-Mail Address: _____

Occupation: _____ Work Phone: _____

Company name: _____ Cell Phone: _____

Address: _____

Name of Parent/Guardian: _____ E-Mail Address: _____

Occupation: _____ Work Phone: _____

Company name: _____ Cell Phone: _____

Address: _____

Has child had an individual intelligence test: No ___ Yes ___ Date: _____

Examiner: _____ Telephone: _____

Do you wish to apply for financial aid? No ___ Yes ___

Date of application: _____ Date received: _____

(To be filled in by EAGLE School)



EAGLE School does not discriminate on the basis of race, color, religion, gender, sexual orientation, or national origin in the administration of services or employment and admission policies.