

KINGSWOOD  
A C A D E M Y



133 Plainfield Road  
Darien, IL 60561  
Telephone: 630-887-1141  
Fax: 630-887-1424  
www.kingswoodacademy.org

**APPLICATION  
FOR  
ADMISSION**

\_\_\_\_\_ Male \_\_\_\_ Female  
Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

\_\_\_\_\_ Present Grade  
Mailing Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_ Applying for Grade  
Home Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Place of Birth \_\_\_\_\_

\_\_\_\_\_ Applying for Year  
What language, other than English, is spoken at home? \_\_\_\_\_ What % of the time? \_\_\_\_\_

\_\_\_\_\_ Parish or church \_\_\_\_\_  
Religious affiliation \_\_\_\_\_

\_\_\_\_\_ Why are you interested in your child attending this school? \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

\_\_\_\_\_ Father/Guardian  
Does this parent/guardian have legal custody? \_\_\_\_\_

\_\_\_\_\_ Mother/Guardian  
Does this parent/guardian have legal custody? \_\_\_\_\_

\_\_\_\_\_ Address (If different from above)

\_\_\_\_\_ Address (If different from above)

\_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

\_\_\_\_\_ Occupation or Position \_\_\_\_\_ Place of Employment \_\_\_\_\_

\_\_\_\_\_ Occupation or Position \_\_\_\_\_ Place of Employment \_\_\_\_\_

\_\_\_\_\_ Employer's Address

\_\_\_\_\_ Employer's Address

\_\_\_\_\_ Type of Business

\_\_\_\_\_ Type of Business

\_\_\_\_\_ Work Phone

\_\_\_\_\_ Work Phone

\_\_\_\_\_ Degrees or Areas of Specialization

\_\_\_\_\_ Degrees or Areas of Specialization

\_\_\_\_\_ Personal E-mail Address

\_\_\_\_\_ Personal E-mail Address

The Admission Office should call: \_\_\_home \_\_\_father's work \_\_\_father's cell \_\_\_mother's work \_\_\_mother's cell during the application process. (Please check all that apply.)



**QUESTIONS ABOUT THE STUDENT**

(To be completed by parent or guardian. Please attach an additional sheet of paper if more room is needed.)

1. Describe the applicant's personality and interests.

---

---

---

2. Describe the applicant's academic abilities and learning style. Has he or she ever skipped a grade or been involved in any enrichment programs?

---

---

---

3. Please list the applicant's participation in extra-curricular activities, sports and/or hobbies including the number of days or hours per week.

---

---

4. Has your child received any tutoring or support by a learning specialist or participated in remedial classes in the last three years? Please list the subject(s) and how often services were or are provided.

---

---

---

5. Has the applicant ever been subject to disciplinary action in any school? If yes, please describe.

---

---

6. Please list all absences from school of more than two weeks duration and provide reasons.

---

---

7. In what ways can Kingswood Academy support your child's academic, social and emotional development?

---

---

---

---

## SCHOOL HISTORY

List all the schools the applicant has attended starting with the most current.

---

Name	Address	Phone	Teacher
Has this school been notified, at this time, of your intent to transfer? _____ yes _____ no			

---

Name	Address	Phone	Teacher
------	---------	-------	---------

---

Name	Address	Phone	Teacher
------	---------	-------	---------

## RECORD REQUEST

For applicant entering 1<sup>st</sup>-8<sup>th</sup> grade: Please **include a copy of your child's most recent report card (both sides) and most recent standardized test scores with this application.** Official transcripts need not be submitted at this time.

## SIGNATURES

By signing this application, I/we affirm that the information given is correct to the best of my/our knowledge. Further, I (we) understand and accept that falsification or deception in any aspect of the application process may result in an immediate review and possible revocation of admission.

Signatures: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_ Date: \_\_\_\_\_  
Parent or Guardian

An application is considered complete when the Admissions Office receives all the requested materials and a non-refundable, \$100.00 per student application fee. The check should be made payable to Kingswood Academy. Please deliver or mail the application and fee to:

**Director of Admission  
Kingswood Academy  
133 Plainfield Road  
Darien, Illinois 60561**

You will be contacted about the next step in the admission process. Thank you for your cooperation in filling out this application. We look forward to serving your family.

\*\*\*\*\*

## REFERRED BY

How did you hear about Kingswood Academy?

\_\_\_\_ Relative \_\_\_\_ Friend \_\_\_\_ Radio \_\_\_\_ Current Kingswood family, if so, who? \_\_\_\_\_

\_\_\_\_ Newspaper \_\_\_\_ Faculty \_\_\_\_ Student \_\_\_\_ Internet, if so, how? \_\_\_\_\_

\_\_\_\_ Other \_\_\_\_\_

*Kingswood Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the Academy. We do not discriminate on the basis of race, color, national and ethnic origin in the administration of our educational policies, financial assistance programs and other school administered programs.*