



# Capital Day School Application for Admission

*A \$50 non-refundable application fee is required.*

Enrollment application for year (date) \_\_\_\_\_ Grade \_\_\_\_\_

## Student Information

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

Preferred Name/Nickname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

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

Home Phone Number \_\_\_\_\_

## Family Information

Mother's Full Name \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Number \_\_\_\_\_

Father's Full Name \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Number \_\_\_\_\_

Student lives with (check all that apply):

\_\_\_\_\_ Mother      \_\_\_\_\_ Stepmother      \_\_\_\_\_ Guardian (relationship):

\_\_\_\_\_ Father      \_\_\_\_\_ Stepfather      \_\_\_\_\_

\_\_\_\_\_ Siblings (names/ages): \_\_\_\_\_

Check any that apply:

\_\_\_\_\_ Mother is Deceased      \_\_\_\_\_ Parents Separated

\_\_\_\_\_ Father is Deceased      \_\_\_\_\_ Parents Divorced

## School Information

Last School of Attendance \_\_\_\_\_ Grade \_\_\_\_\_

Principal/Head \_\_\_\_\_ Teacher \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_