



105 John Wilson Way • Morgan Hill, California 95037
 (408) 782-7177 • fax (408) 782-7138

ACCREDITED BY THE WESTERN ASSOCIATION OF SCHOOLS & COLLEGES

OFFICE USE ONLY		
App. Fee:	Amount _____	Date _____ Check # _____
Shadow:	Date _____	Date _____
Interview:	Date _____	Time _____
Enr. Fee:	Amount _____	Date _____ Check # _____

ENROLLMENT APPLICATION 2008-2009

STUDENT:		PRIMARY ADDRESS:	
<small>FIRST</small>	<small>MIDDLE</small>	<small>LAST</small>	<small>STREET</small>
PREFERRED NAME:	BIRTHDATE:		<small>CITY</small> <small>STATE</small> <small>ZIP</small>
	GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female		<small>HOME PHONE</small>

APPLYING FOR ENTRANCE INTO GRADE

<p style="text-align: center;">Preschool</p> <p><input type="checkbox"/> AM 5-Day (Mon - Fri) <input type="checkbox"/> AM 3-Day (Mon, Wed, Fri) <input type="checkbox"/> AM 2-Day (Tu & Th)</p> <p><input type="checkbox"/> PM 3-Day (Tu, Wed, Th)</p>	<p style="text-align: center;">Kindergarten</p> <p><input type="checkbox"/> AM (Mon - Fri, 8-1) <input type="checkbox"/> PM (Mon - Fri, 10-3)</p>		
<p style="text-align: center;">Jr. Kindergarten</p> <p><input type="checkbox"/> AM (Mon - Fri) <input type="checkbox"/> PM (Mon - Fri)</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px; vertical-align: top;"> <p style="text-align: center;">Elementary School</p> <p><input type="checkbox"/> 1st Grade <input type="checkbox"/> 4th Grade <input type="checkbox"/> 2nd Grade <input type="checkbox"/> 5th Grade <input type="checkbox"/> 3rd Grade</p> </td> <td style="width: 50%; padding: 5px; vertical-align: top;"> <p style="text-align: center;">Middle School</p> <p><input type="checkbox"/> 6th Grade <input type="checkbox"/> 7th Grade <input type="checkbox"/> 8th Grade</p> </td> </tr> </table>	<p style="text-align: center;">Elementary School</p> <p><input type="checkbox"/> 1st Grade <input type="checkbox"/> 4th Grade <input type="checkbox"/> 2nd Grade <input type="checkbox"/> 5th Grade <input type="checkbox"/> 3rd Grade</p>	<p style="text-align: center;">Middle School</p> <p><input type="checkbox"/> 6th Grade <input type="checkbox"/> 7th Grade <input type="checkbox"/> 8th Grade</p>
<p style="text-align: center;">Elementary School</p> <p><input type="checkbox"/> 1st Grade <input type="checkbox"/> 4th Grade <input type="checkbox"/> 2nd Grade <input type="checkbox"/> 5th Grade <input type="checkbox"/> 3rd Grade</p>	<p style="text-align: center;">Middle School</p> <p><input type="checkbox"/> 6th Grade <input type="checkbox"/> 7th Grade <input type="checkbox"/> 8th Grade</p>		
Is student a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, please explain.)</i>			
Has your child ever been evaluated for educational needs? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>(If yes, please explain.)</i>			

HOME INFORMATION

MOTHER'S INFO: <small>For families with more than one household, please complete a separate form for each household.</small>	<small>Omit from school directory.</small>	FATHER'S INFO: <small>For families with more than one household, please complete a separate form for each household.</small>	<small>Omit from school directory.</small>	EMERGENCY CONTACTS: <small>In cases of emergency when parents cannot be reached, call the following person(s):</small>
Name:		Name:		Contact:
<small>FIRST</small> <small>LAST</small>		<small>FIRST</small> <small>LAST</small>		Relationship:
Home Address:		Home Address:		Phone:
<small>STREET</small>		<small>STREET</small>		Doctor:
<small>CITY</small> <small>STATE</small> <small>ZIP</small>		<small>CITY</small> <small>STATE</small> <small>ZIP</small>		Phone:
Home Phone:		Home Phone:		Health Concerns:
Work Phone:		Work Phone:		
Mobile Phone:		Mobile Phone:		
E-Mail:		E-Mail:		
Employer:	X	Employer:	X	
Position:	X	Position:	X	

OTHER CHILDREN IN THE FAMILY *(not currently at Oakwood):*

NAME	BIRTHDATE	GRADE 08-09	CURRENT SCHOOL

TREE HOUSE EXTENDED CARE ENROLLMENT 2008-2009

Please indicate the days and sessions of the week your child will be attending Tree House Extended Care next year. Please refer to the Tree House Fee Schedule for times and pricing.
(*Not applicable for high school students.*)

SESSION	MON.	TUES.	WED.	THURS.	FRI.
Before School					
AM School Day					
PM School Day					
After School					

NOTE: Requests for Tree House are accepted on a first-come, first-served basis, depending on space availability. You will have the opportunity to confirm Tree House Extended Care enrollment before the May 2nd tuition deadline.

REFERENCES

Whom may we contact as a school reference for your child (<i>if child has already attended school</i>)?	NAME	PHONE	RELATIONSHIP
What Oakwood families may we contact as a reference (<i>if you know an Oakwood family</i>)?	NAME	PHONE	RELATIONSHIP
School last attended (<i>if applicable</i>)	SCHOOL	GRADES ATTENDED	REASON FOR LEAVING

WHERE DID YOU HEAR ABOUT US? (*check all that apply*):

- Advertisement in _____
 Article in _____
 Mailer
 Invitation from _____
 Other _____
 Television ad

IMMUNIZATIONS NOTE

The California School Immunization Law requires that children be up-to-date on their immunizations (shots) to attend school or childcare. Most children will require booster shots before starting Kindergarten and at entry to High School. Parents must provide proof of immunizations. Your child may be exempt from some or all immunizations by a doctor because of a medical condition or due to personal or religious belief; however, these circumstances must be detailed and signed off on health records. ***Children cannot by law be admitted to class without an up-to-date immunization record or signed waivers on file in the school office.***

PERMISSION TO USE PHOTOGRAPH

Oakwood periodically photographs our students in action. They may be in and out of classrooms, on the playground or athletic fields, and at school functions. These pictures may be used in the Oakwood Outlook newsletter, the yearbook, and other publicly available forums. **If you do not want a picture of your child to be used in these circumstances, please put your request in writing providing your specific restrictions and attach it to this enrollment confirmation.**

APPLICATION FOR ENROLLMENT

Oakwood admits students of any race, religion, color, or national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, religion, color, or national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs, or athletic and other school-administered programs. A non-refundable \$50 evaluation fee is due with this application.

By signing below, I acknowledge that I have carefully reviewed the information contained herein and that the information is true and accurate. Furthermore, I understand that if my child(ren) are accepted and enroll at Oakwood, it will signify a willingness to abide by the school's standards. I agree to abide by the school's standards and promise to pay all applicable tuition, fees and any other financial obligations associated with the education of my child at Oakwood. I further agree to pay any and all fees associated with debt collections, if needed. Upon acceptance into Oakwood, a non-refundable enrollment fee is due. Once enrolled, in the event that the school receives a "Request for Records" from another school, your child's records will be forwarded and his/her space at Oakwood will be forfeited. A "Request for Records" serves as a notice that you are not returning to Oakwood, but should also accompany a written statement from you.

SIGNATURE: _____ RELATIONSHIP: _____ DATE: _____

Thank you for your interest in Oakwood!