

# KENT PLACE SCHOOL

## APPLICATION FOR ADMISSION

Please complete this form and return it in the envelope provided with a non-refundable \$70.00 application fee.

Grade applying for \_\_\_\_\_ Entering year \_\_\_\_\_ Age in September of entering year \_\_\_\_\_ years \_\_\_\_\_ months

Full legal name \_\_\_\_\_ Nickname \_\_\_\_\_

Home address (street) \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

Telephone \_\_\_\_\_ Student e-mail \_\_\_\_\_

Date of birth \_\_\_\_\_ Country of birth \_\_\_\_\_ Country of citizenship \_\_\_\_\_ Gender:  Female  Male  
(if you are applying for Nursery or Pre-Kindergarten)

Native language \_\_\_\_\_ Race/ethnicity (optional) \_\_\_\_\_

.....  
**Father's full name** \_\_\_\_\_

Home address (street) \_\_\_\_\_

Cellular telephone \_\_\_\_\_

(city, state, zip) \_\_\_\_\_ Home telephone \_\_\_\_\_

Home e-mail \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business address (street) \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

Business telephone \_\_\_\_\_ Fax \_\_\_\_\_ Business e-mail \_\_\_\_\_

Schools/colleges attended \_\_\_\_\_

.....  
**Mother's full name** \_\_\_\_\_

Home address (street) \_\_\_\_\_

Cellular telephone \_\_\_\_\_

(city, state, zip) \_\_\_\_\_ Home telephone \_\_\_\_\_

Home e-mail \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Business address (street) \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

Business telephone \_\_\_\_\_ Fax \_\_\_\_\_ Business e-mail \_\_\_\_\_

Schools/colleges attended \_\_\_\_\_

Check all that apply:  Father deceased  Mother deceased  Parents divorced  Parents separated  Father remarried  Mother remarried

To whom should KPS correspondence be sent?  Both  Father  Mother  Guardian



Name of person(s) responsible for financial obligation \_\_\_\_\_

Medical condition of applicant that requires special consideration \_\_\_\_\_

Present school \_\_\_\_\_ Grade \_\_\_\_\_

School address (street) \_\_\_\_\_

(city, state or country, zip) \_\_\_\_\_ Telephone \_\_\_\_\_

Principal or Head of School \_\_\_\_\_ Dates of attendance \_\_\_\_\_

Previous schools attended (most recent first)

School \_\_\_\_\_ Dates of attendance \_\_\_\_\_

School \_\_\_\_\_ Dates of attendance \_\_\_\_\_

School \_\_\_\_\_ Dates of attendance \_\_\_\_\_

School \_\_\_\_\_ Dates of attendance \_\_\_\_\_

School \_\_\_\_\_ Dates of attendance \_\_\_\_\_

Siblings

name \_\_\_\_\_ age \_\_\_\_\_ school or occupation \_\_\_\_\_

name \_\_\_\_\_ age \_\_\_\_\_ school or occupation \_\_\_\_\_

name \_\_\_\_\_ age \_\_\_\_\_ school or occupation \_\_\_\_\_

Names and relationships of relatives who attended KPS and year of graduation \_\_\_\_\_

Have you previously applied for this candidate?  Yes  No

How did you first learn of Kent Place School? \_\_\_\_\_

Will your family be applying for financial assistance?  Yes, please send necessary forms  No

The application process will begin when this form has been completed and returned to the Admission Office with the non-refundable application fee of \$70 payable to the Treasurer, Kent Place School. This application is not binding. The school will furnish a contract when an applicant is admitted. Final acceptance depends on school records, letters of recommendation, campus visit, results of entrance examination or screening, student application and availability of space. **The decision of the Admission Committee is final.** It is understood that students are entered for the full year.

Parent or Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_



**Please return this application to:**  
Admission Office  
Kent Place School  
42 Norwood Avenue  
Summit, NJ 07902-0308

PLEASE ATTACH  
PHOTOGRAPH  
HERE  
  
This is an option and has  
no influence on the  
selection process at Kent  
Place School. The picture  
simply serves as a  
reminder of the person  
behind the application.