

# TRINITY SCHOOL OF DURHAM & CHAPEL HILL

## APPLICATION FOR ADMISSION 2006–2007

Attach Photo

Deadlines for admission and financial aid applications:  
Grades TK–1: **JANUARY 24, 2006**; Grades 2–8: **JANUARY 31, 2006**;  
Grade 9 (early action): **December 16, 2005**

*Applications received after stated deadlines will be processed and considered as they are received. However, special consideration cannot be guaranteed for applications that come in after the stated deadlines.*

### APPLICANT INFORMATION

Applying for Grade \_\_\_\_\_

Applicant's Name \_\_\_\_\_  
*Last First Middle Preferred Name*

Sex:  Male  Female Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Social Security Number \_\_\_\_\_

Applicant's Home Address \_\_\_\_\_  
*Street City*  
\_\_\_\_\_  
*State Zip Code Telephone Number*

Applicant resides with:  Both Parents  Mother  Father  Legal Guardian  Other \_\_\_\_\_

Has applicant applied for admission to Trinity School in previous years?  Yes  No *If yes, what year(s) \_\_\_\_\_*

### PARENT / LEGAL GUARDIAN INFORMATION

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_  
*Last First Title Last First Title*

Preferred Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Home Address \_\_\_\_\_ Home Address \_\_\_\_\_  
*(If different from applicant's) (If different from applicant's)*

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
*(If different from applicant's) (if different from applicant's)*

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

Email \_\_\_\_\_ Email \_\_\_\_\_

Place of Business \_\_\_\_\_ Place of Business \_\_\_\_\_

Position/Title \_\_\_\_\_ Position/Title \_\_\_\_\_

Business Address \_\_\_\_\_ Business Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

*Office Use:*

*Date Application Received \_\_\_\_\_ Check Number \_\_\_\_\_ Amount \_\_\_\_\_*

Parents' Marital Status:  Married  Separated  Divorced  Parent(s) Deceased  Single

**CHECK ANY THAT APPLY:**

Receive Mail?  Father  Mother  Guardian  Other \_\_\_\_\_  
Legal Custody?  Father  Mother  Guardian  Other \_\_\_\_\_  
Financial Responsibility?  Father  Mother  Guardian  Other \_\_\_\_\_

Additional Information: \_\_\_\_\_

Siblings	Date of Birth	Age	School	Current Grade
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Is a language other than English spoken in your home?  Yes  No *If yes, what language* \_\_\_\_\_

Please indicate how you heard about Trinity School:

Trinity Parent  Friend  Website  Newspaper  Magazine  Other \_\_\_\_\_

Place of Worship (optional) \_\_\_\_\_

**SCHOOL INFORMATION**

Present School:  Public  Charter  Independent/Private  Home School

Dates of Attendance \_\_\_\_\_

Present School Name \_\_\_\_\_

School Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Present Teacher(s): \_\_\_\_\_

What are your child's favorite subjects and/or activities? \_\_\_\_\_

*(Please complete if child has attended his/her present school for less than 2 years)*

Name of Previous School \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Dates of Attendance \_\_\_\_\_

Grades Completed \_\_\_\_\_

**REFERENCE**

List the names and addresses of the individuals who will be completing the two reference forms. One reference must be provided by the applicant's current teacher. The second reference should be completed by a teacher or a person (other than relatives) who knows the applicant well and has observed him or her in a structured educational setting. For 9<sup>th</sup> grade applicants, references should be completed by current or most recent Language Arts and Mathematics teachers. References should be mailed directly to Trinity by the person completing the form.

Name \_\_\_\_\_ Position/Title \_\_\_\_\_

School/Employer \_\_\_\_\_

Address (to send acknowledgement) \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Work Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_

How does this person know your child?

**REFERENCE**

Name \_\_\_\_\_ Position/Title \_\_\_\_\_  
School/Employer \_\_\_\_\_  
Address (to send acknowledgement) \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Work Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_  
How does this person know your child?

Does your child's health limit or interfere with the normal performance of everyday activities, including class work, athletics, or other duties?  Yes  No *If yes, please explain below.*

\_\_\_\_\_  
\_\_\_\_\_

Has your child experienced any difficulties, challenges, or personal setbacks in recent years? \_\_\_\_\_

\_\_\_\_\_

Has your child skipped any grades?  Yes  No *If yes, what grade(s) \_\_\_\_\_*

Has your child repeated any grades?  Yes  No *If yes, what grade(s) \_\_\_\_\_*

Has your child ever been suspended (in school/out of school)?  Yes  No *If yes, please explain below*

\_\_\_\_\_  
\_\_\_\_\_

Has your child ever been expelled?  Yes  No *If yes, please explain below*

\_\_\_\_\_  
\_\_\_\_\_

Has your child been assessed for admission by any other school in the last six months?  Yes  No  
*If yes, what type of assessment was given (e.g., Gesell, KSEAL, CTP IV)?*

\_\_\_\_\_

**FAMILY EXPECTATIONS**

Please explain why you want your child to attend Trinity School.

\_\_\_\_\_  
\_\_\_\_\_

What are your expectations of Trinity School in regard to educating your child?

\_\_\_\_\_  
\_\_\_\_\_

Please describe gifts, interests, and/or joys and challenges unique to your child.

\_\_\_\_\_  
\_\_\_\_\_

If you would like to share information about your family that you believe would enhance the diversity of Trinity School, please do so below.

\_\_\_\_\_  
\_\_\_\_\_

Children grow in many ways during their early years (physically, emotionally, cognitively, socially), and not all children develop at the same rate. Some children may benefit from taking an extra year before entering Trinity's kindergarten or first grade even though they will have reached the chronological age of five for kindergarten or six for first grade on or before July 1. In light of this, have you ever considered giving your child another year before entering kindergarten or first grade? Why or why not?

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**EARLY ACTION (For Grade 9 Applicants)**

Grade 9 applicants who are able to (1) submit all application materials (*i.e., admission and financial aid application, applicant's questionnaire, school transcripts, references*) and (2) complete the ISEE exam and classroom visit by **December 16, 2005**, will be notified of an admission decision **January 13, 2006**.

As a 9<sup>th</sup> grade applicant, do you anticipate completing the application process by **December 16, 2005** in order to receive a decision **January 13, 2006**?  YES  NO

**FINANCES**

Do you intend to apply for Financial Aid?  YES  NO

*If yes, please obtain a Financial Aid application packet from the school office.*

**APPLICATION SUBMISSION CHECKLIST**

- Completed application
- Copy of birth certificate
- Grade 9, applicant's questionnaire
- Grades TK–4, nonrefundable fee of \$75
- Grades 5–9, nonrefundable fee of \$55

**PARENT SIGNATURE**

The information provided on this application is accurate and complete. All information and documentation obtained during the admission process becomes the property of Trinity School and is considered confidential between Trinity School and the source of the information. I understand that Trinity School seeks to admit only students whose educational needs it has the resources to meet and that Trinity School does not discriminate in admission on the basis of race, color, creed, or ethnic or national origin.

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Signature

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Date