



# APPLICATION FOR ADMISSION 2024 – 2025

Please attach (or send via e-mail to [kristin.beers@siskiyouschool.org](mailto:kristin.beers@siskiyouschool.org)):  
2 recent photos, one of your child alone and one with family,  
\$100 application fee. Thank you!

Child's Full Name \_\_\_\_\_ Gender \_\_\_\_\_

Date of Birth \_\_\_\_\_ Birthplace \_\_\_\_\_ Citizenship \_\_\_\_\_

Applying for Grade \_\_\_\_\_ Preferred Date of Entrance \_\_\_\_\_

## PARENT/GUARDIAN CONTACT INFORMATION

### Parent/Guardian

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

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

### Parent/Guardian

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

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

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## SCHOOL ATTENDANCE

For grades 2 – 8, please provide a copy of most recent school records with this application.

### Current Attendance

Current School \_\_\_\_\_

Current Teacher \_\_\_\_\_ Phone # \_\_\_\_\_

### Previous Schools Attended

Name	City	Dates	Reason for leaving

## PARENT, FAMILY, AND SIBLING INFORMATION

Describe your child's living situation. Which parent/guardian does your child live with? Any recent changes in the living situation? Do you foresee any changes in the near future?

Sibling	Date of Birth	Present School	Grade

## CHILD'S ACADEMIC/HEALTH INFORMATION

Please describe any relevant medical information, special learning needs or concerns.



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## **ADDITIONAL QUESTIONS**

How would you describe your child?

Include information about outstanding characteristics (strengths, challenges), social interactions with family and peers, favorite activities (hobbies, music, art, sports, etc.), nature of play (choice of activities inside/outside), interest in reading, defining events of childhood and anything else you can think of that will help us 'get a picture'.

What draws you to the Siskiyou School?



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What are three core values you hold for the education of your child?

Is there anything else you'd like us to know about your family situation or child?

**Thank you** for taking the time to submit this application to the Siskiyou School. We appreciate your understanding that enrollment is a deliberate process at our school to ensure we are able to meet needs of both child and family. If you have questions or concerns, please call Kristin Beers at 541-482-8223, ext. 11.

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The information submitted is true and complete to the best of my knowledge.

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Parent/Guardian Signature

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Date

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Parent/Guardian Signature

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Date

**Non-Discrimination Policy:** The Siskiyou School will not discriminate against any person, adult or child, on the basis of race, creed, religion, disability, gender identity, sexual orientation, or national origin. This Non- Discrimination Policy applies to, but is not limited to; the admission of students, the hiring of faculty and staff, the use of school facilities, the participation in school programs, policies, practices and the administration of educational policies.

