



Application for Admission

Please complete in ink

 Last Name First Name Middle Name Preferred Name

 Street Address

 City State Zip or Postal Code Country

Birth Date ____/____/____ Current Grade ____ Applying Grade ____
 Month Day Year

Desired Term of Entry: Fall (September) Spring (January)

Day or Boarding: Day Boarding

Ethnicity (optional): African American or Black Asian Caucasian Hispanic / Latino
 Native American Pacific Islander Multiracial Other _____

Parent/Guardian 1

Parent/Guardian 2

Title (Please circle) Mr. Mrs. Ms. Miss. Dr.	Title (Please circle) Mr. Mrs. Ms. Miss. Dr.
Name	Name
Relationship	Relationship
Home Phone	Home Phone
Cell Phone	Cell Phone
E-mail Address	E-mail Address
Full Address (if different from applicant)	Full Address (if different from applicant)
Occupation/Job Title	Occupation/Job Title
Company	Company
Full Address	Full Address
Business Phone	Business Phone
Fax	Fax
E-mail	E-mail

Marital Status: Single Married Divorced Separated
 Father Deceased Mother Deceased

Name of Candidate _____

Legal Guardian(s)/Custodian(s) _____

Siblings (please list name, age, and current grade) _____

Current School:

School Name _____ Address _____

Current Teacher _____ Phone Number _____

Prior Schools:

School Name	Grades	Years	Reason for leaving

Describe your son's learning style. Has your son ever been **tutored** outside of school or had an educational, behavioral, or social **evaluation**? If so, please explain.* _____

Any specific **diagnoses**, including health or physical concerns or limitations (e.g. allergies, asthma, A.D.D., bedwetting, etc.), emotional concerns, or traumatic experiences? *

*Attach separate sheet if necessary. **Please note** that providing false or incomplete information could result in a reconsideration of the student's eligibility for enrollment.

Musical Training:

School Music Teacher _____ Email _____

Choir Director _____ Email _____

Choir Name _____

Address _____

Name of Candidate _____

Other Vocal / Musical Groups/Instruction (please describe): _____

Parent/Guardian Questionnaire:

Please discuss your primary reason for considering The American Boychoir as a new school for your son.

Describe your son as an individual. What are his strengths and weakness?

Describe your son's interests and hobbies. These may be athletic activities, clubs and organizations, music lessons or other things he likes to do.

What do you see as your son's greatest challenge in adapting to The American Boychoir School?

If your son will board, what will he miss the most about not being at home?

Name of Candidate _____

How did you hear about The American Boychoir School? _____

Financial Aid:

The School awards financial aid based on an individual family's need. In recent years, more than half of the student body has qualified for assistance. Parents are required to provide information to the School and Student Service for Financial Aid (SSS), a division of the Educational Testing Service, and must provide ABS with their most recent IRS Form 1040 and W-2 forms as part of the requested documentation. SSS evaluates each family's resources and reports an Estimated Family Contribution to the School (families may request a copy of the report directly from SSS). All information is confidential and available only to the Financial Aid Committee for the purposes of making a determination.

Will you be applying for Financial Aid? Yes No

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

Signature of Parent(s) or Guardian(s)

Date