



FOR OFFICE USE ONLY

Application _____	Decision _____
App. Fee _____	Contract _____
Parent Quest. _____	Deposit _____
Student Quest _____	Final Transcripts _____
Transcript _____	Physical (K-8) _____
Testing _____	Immunization _____
Teacher Rec. _____	Copy of Birth Cert. _____
Classroom Visit _____	

## WARE ACADEMY APPLICATION FOR ADMISSION PRE-KINDERGARTEN FOUR THROUGH GRADE EIGHT

*Please provide all information requested and return to Admissions Office, Ware Academy, 7936 John Clayton Memorial Highway, Gloucester, VA.23061 together with the Parent Questionnaire and a non-refundable application fee of \$75. The application becomes complete when this form, the application fee, and all supporting documentation requested have been received.*

**PLEASE PRINT OR TYPE**

Full Name of Applicant \_\_\_\_\_  
First Middle Last Prefers to be called

Applying for Grade \_\_\_\_\_ Year \_\_\_\_\_ Social Security No. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month/Day/Year

**NAME OF PARENT(S) OR GUARDIAN(S) WITH WHOM CHILD PRIMARILY RESIDES:**

Father's Name \_\_\_\_\_ Place of Birth \_\_\_\_\_  
(or Guardian's) First Middle Last

Mother's Name \_\_\_\_\_ Place of Birth \_\_\_\_\_  
(or Guardian's) First Middle Last

Home Address \_\_\_\_\_  
Street City State Zip Code

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address (if different from home address) \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**STUDENT LIVES WITH:**

\_\_\_\_ Father \_\_\_\_ Stepfather

\_\_\_\_ Mother \_\_\_\_ Stepmother

\_\_\_\_ Other Name and Relationship) \_\_\_\_\_

**CHECK ANY THAT APPLY:**

\_\_\_\_ Father Deceased \_\_\_\_ Parents Divorced

\_\_\_\_ Mother Deceased \_\_\_\_ Parents Separated

Father's Employer \_\_\_\_\_ Position \_\_\_\_\_

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

Business Telephone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Mother's Employer \_\_\_\_\_ Position \_\_\_\_\_

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

Business Telephone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Person(s) financially responsible \_\_\_\_\_

If other than parent(s), provide address \_\_\_\_\_

Copies of correspondence should also be sent to (e.g., in case of separation/divorce, non-custodial or joint custodial parent):

\_\_\_\_\_  
Name Address

**Grandparent's Name (Paternal)** \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

**Grandparent's Name (Maternal)** \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

**Name of school most recently attended** \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Dates of attendance \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**Other children in family:**

Name \_\_\_\_\_ Age \_\_\_\_\_ School/College \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School/College \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ School/College \_\_\_\_\_

If either or both parents are alumni of Ware Academy (or Gloucester County Day School), please give dates of attendance:

Mother (Maiden Name) \_\_\_\_\_

Father \_\_\_\_\_

*If the applicant has undergone any educational or psychological assessments, these assessments are described in the Parent Questionnaire and copies of same herewith are or have been submitted to Ware Academy.*

*We here make application for the admission of the above-named student to Ware Academy. Final acceptance of the applicant depends upon previous and present school performance, standardized test results, all supporting documents, personal interview, and the number of openings available.*

*All responses in this application and supporting documents are complete and true, to the best of my/our ability. Any material omissions or misrepresentations, even if inadvertent, will be grounds for voiding any subsequent acceptance or contract issued.*

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Mother or Guardian

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Father or Guardian