



# GARDEN SCHOOL

Jackson Heights, New York

Richard Marotta, Ph. D., Headmaster

## Enrollment Application

(This application is not for the Pre-K For All Program. Please visit DOE website.)

### Applicant and Family Information

M / F

\_\_\_\_\_  
Last First Middle Gender Date

Applying for grade \_\_\_\_ Current Age \_\_\_\_ Birth date \_\_\_\_\_ Age as of Dec. 1, 2017 Yrs. \_\_\_\_ Mos. \_\_\_\_

#### Applicant Address:

#### Parent 1 \_\_\_\_\_

#### Parent 2 \_\_\_\_\_

\_\_\_\_\_  
Address (if different from applicant)

\_\_\_\_\_  
Address (if different from applicant)

\_\_\_\_\_  
Address (if different from applicant)

City: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_

Siblings and ages: \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

Occupation/Title: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_

Child lives with: \_\_\_\_\_

If parents do not reside together, indicate custody status: \_\_\_\_\_

Primary language: \_\_\_\_\_

Other language(s) spoken: \_\_\_\_\_

### Applicant Educational History

Current School: \_\_\_\_\_ Dates Attended: \_\_\_\_\_

Address: \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Previous Schools Attended	Grades	Years	Contact name and phone number

Do we have permission to request your child's records? (Parents must circle one) YES NO

(Please complete page 2)



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## Enrollment Application (page 2)

Compatibility between your parental values and practices and those of your school is an essential component in ensuring a successful school experience. Please answer the following questions.

Have you ever attended/applied to Garden previously? If so, when and what was your reason for leaving/not attending?

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Why are you considering Garden School for your child? Why might Garden be a good fit?

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What are your child's strengths?

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In what areas does your child need extra support?

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What kind of personal/professional skills, resources, and/or support as a parent would you be interested in sharing with the Garden teachers, students, or the community in general?

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Please indicate below if the applicant has any after school commitments

Tutoring: \_\_\_\_\_ Special Lessons: \_\_\_\_\_

Sports/Clubs: \_\_\_\_\_ Other: \_\_\_\_\_

How did you become aware of Garden School? If applicable, whom may we thank for referring you to Garden?

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\_\_\_\_\_  
Parent/guardian signature and date

\_\_\_\_\_  
Parent/guardian signature and date

**This Enrollment Application must be filled out and returned to Garden School with the \$50 application fee and all necessary supporting documents for your application to be considered complete.**

Garden School does not discriminate on the basis of gender, religion, age, race, color, sexual orientation, physical disability, or ethnic origin in admissions, financial assistance, or hiring. Garden welcomes families of all racial, economic, and social backgrounds.