



## TRANSITIONAL KINDERGARTEN–GRADE 2

- Application
- Copy of Birth Certificate
- Two (2) Teacher References
- School Records (see the Transcript Release Form for a complete list)
- Gesell Observation (scheduled by the Admission Office)
- Classroom Assessment (scheduled by the Admission Office)
- Parent Survey

## GRADES 3–4

- Application
- Copy of Birth Certificate
- Two (2) Teacher References
- School Records (see the Transcript Release Form for a complete list)
- Classroom Observation (scheduled by the Admission Office)
- Parent Survey

## GRADES 5–6

- Application
- Copy of Birth Certificate
- Two (2) Teacher References
- School Records (see the Transcript Release Form for a complete list)
- ISEE Exam (Applicant must register with the ISEE Operations Office)
- Half-day Classroom Visit
- Interview (applicants for grade 6 only)

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*Separate Application*

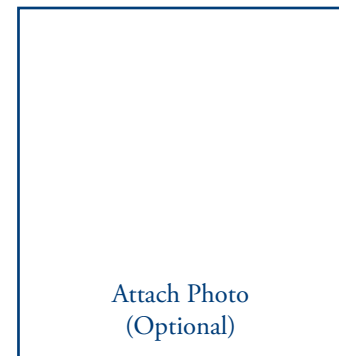
## GRADES 7–8

- Application
- Copy of Birth Certificate
- Applicant Questionnaire
- One (1) English Teacher Reference
- One (1) Math Teacher Reference
- School Records (see the Transcript Release Form for a complete list)
- ISEE Exam (Applicant must register with the ISEE Operations Office)
- Half-Day Classroom Visit and Interview

## GRADES 9–12

- Application
- Copy of Birth Certificate
- Applicant Questionnaire
- One (1) English Teacher Reference
- One (1) Math Teacher Reference
- School Records (see the Transcript Release Form for a complete list)
- ISEE Exam (register with the ISEE Operations Office), PSAT, SAT, or ACT scores
- Half-Day Classroom Visit and Interview

# TRINITY SCHOOL ADMISSION APPLICATION



Academic Year \_\_\_\_\_

## APPLICANT INFORMATION

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

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

Sex:  Male  Female Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_

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

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 \_\_\_\_\_  
*Last First Title Preferred Name*

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

Father's Home Phone \_\_\_\_\_ Father's Cell Phone \_\_\_\_\_ Father's E-mail \_\_\_\_\_  
*(If different from applicant's)*

Father's Place of Business \_\_\_\_\_ Father's Position/Title \_\_\_\_\_

Father's Business Address \_\_\_\_\_ Father's Business Phone \_\_\_\_\_

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

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

Mother's Home Phone \_\_\_\_\_ Mother's Cell Phone \_\_\_\_\_ Mother's E-mail \_\_\_\_\_  
*(If different from applicant's)*

Mother's Place of Business \_\_\_\_\_ Mother's Position/Title \_\_\_\_\_

Mother's Business Address \_\_\_\_\_ Mother's Business Phone \_\_\_\_\_

### OFFICE USE ONLY:

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

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

**CHECK ALL THAT APPLY:**

Legal Custody?  Father  Mother  Guardian  Other  
Financial Responsibility?  Father  Mother  Guardian  Other  
Receives Mail?  Father  Mother  Guardian  Other  
Additional Information: \_\_\_\_\_

Sibling(s) Name (s)	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 hear about Trinity School:**

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

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

**SCHOOL INFORMATION**

Present School:  Public  Charter  Independent/Private  Home School

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

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

School Address \_\_\_\_\_  
*Street City State Zip Telephone*

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

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

*Please complete the information below if your child has attended his/her present school for less than 2 years:*

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

School Address \_\_\_\_\_  
*Street City State Zip Telephone*

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

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. \_\_\_\_\_

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

***Transitional Kindergarten–Grade 1 Applicants Only***  
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?  Yes  No  
Why or why not? \_\_\_\_\_

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

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

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

Has your child ever been expelled?  No  Yes If yes, please explain. \_\_\_\_\_

Has your child been assessed for admission by any other school in the last six months?  No  Yes

If yes, what type of assessment was given (e.g., Gesell, KSEALS, CTP IV)? \_\_\_\_\_

## FAMILY EXPECTATIONS (Please feel free to attach additional sheets if necessary)

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

What are your expectations of Trinity School in regards to educating your child? \_\_\_\_\_

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

## STATISTICAL INFORMATION (OPTIONAL)

The following information will be used for statistical purposes only. Please indicate applicant's ethnicity/race. If these categories do not reflect your child's ethnicity, please feel free to check the "other" box and fill in the correct information.

Applicant's Ethnicity/Race (please check one):

- American Indian/Alaska Native  Asian/Pacific Islander  Black (not Hispanic)  Hispanic  Multi-Racial  
 White (not Hispanic)  Other \_\_\_\_\_

## APPLICANT CHECKLIST:

- Completed application  **Nonrefundable fee of \$85 for Grades TK-4, or \$65 for Grades 5-12**  
 Copy of birth certificate  Submitted transcript release form to applicant's current school  
 Registered for ISEE exam, Grades 5-12  Submitted reference form to teachers, who are required to mailed directly to Trinity School

## FINANCES

Trinity School awards need-based financial aid on the basis of demonstrated and documented need up to a maximum of 50% of tuition unless there are extenuating circumstances, which are evaluated on a year-to-year basis. Financial aid is awarded per student and is not transferable within the family. Applicants must complete the admission process and be offered an enrollment space before an application for financial aid can be acted upon by the Financial Aid Committee.

*Trinity School does not take the intent to apply for financial aid into consideration when making admission decisions.*

**Do you intend to apply for Financial Aid?**  No  Yes If yes, please share required financial information through the FAST (Financial Aid for School Tuition) program's secure server. Its website link can be found on the admission section of Trinity's website: [www.trinityschoolnc.org](http://www.trinityschoolnc.org).

**Deadlines for admission and financial aid applications are:**

**TK-Grade 1: January 6, 2012**

**Grades 2-12: January 20, 2012**

*Applications received after stated deadlines will be processed and considered as they are received. Special consideration cannot be guaranteed for applications received after the stated deadlines.*

**Please note: This application is not complete without a parent's signature on page 5.**

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

## REFERENCES

List the names and addresses of the individuals who will be completing the two reference forms. For students applying for grades TK-6, 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 a relative) who knows the applicant well and has observed him or her in a structured educational setting.

REFERENCE #1				
Name _____	Position/Title _____			
School/Employer _____				
Address _____				
	Street	City	State	Zip Code
Work Telephone _____	Home Telephone _____			
How does this person know your child? _____				

REFERENCE #2				
Name _____	Position/Title _____			
School/Employer _____				
Address _____				
	Street	City	State	Zip Code
Work Telephone _____	Home Telephone _____			
How does this person know your child? _____				

## ADMISSION DECISIONS

### Families can expect one of three decisions by the school:

- Acceptance:** Applicant is approved for admission and offered an enrollment space.
- Denial:** Applicant is not approved for admission.
- Wait Pool:** Applicant is approved for admission and considered for placement if/when space becomes available.

### Applicants will be notified of admission and financial aid decisions by mail.

- Grades TK-1:** Applicants who applied on time will be notified by mail **February 17, 2012**.
- Grades 2-8:** Applicants who applied on time will be notified by mail **March 2, 2012**.
- Grades 9-12:** Applicants who applied on time will be notified by mail **March 16, 2012**.

## PARENT SIGNATURE

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. The information provided on this application is accurate and complete, and I have not intentionally withheld or misrepresented any pertinent data.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## NON-DISCRIMINATION POLICY

Trinity School seeks to admit only students whose educational needs it has the resources to meet, and Trinity School does not discriminate in admission on the basis of race, color, creed, or ethnic or national origin.

# TRINITY SCHOOL OF DURHAM AND CHAPEL HILL REFERENCE #1

Name of Applicant \_\_\_\_\_  
 Applicant for Grade \_\_\_\_\_  
 Applying for Academic Year \_\_\_\_\_  
 Applicant's Current Grade \_\_\_\_\_ Current Academic Year \_\_\_\_\_

**All information on this reference form is considered CONFIDENTIAL**

The student listed above is a candidate for admission to Trinity School. We appreciate your cooperation in completing this form, as it provides one way of getting to know the child. Our desire is to create, to the best of our abilities, the optimal match of child, school, and placement. Please leave blank any sections that do not apply to your relationship with the applicant.

**Transitional Kindergarten (TK), Kindergarten (K), or Grade 1 applicant references complete Sections 1, 2A, 3, and 4**  
**Grades 2–6 applicant references complete Sections 1, 2B, 3, and 4**

What is your relationship to the applicant? \_\_\_\_\_  
 How long have you known the applicant? \_\_\_\_\_

## SECTION 1: APPLICANTS (TK-6)

Social Development	Always	Usually	Sometimes	Rarely	Never
Is open to friendship					
Has a tendency to lead					
Has a tendency to follow					
Is imaginative					
Adjusts to changes in routine					
Exhibits positive attitude toward teacher(s)					
Exhibits positive attitude toward peer(s)					
Handles frustrations appropriately					
Resolves problems with physical aggression					
Accepts suggestions and corrections					

Comments \_\_\_\_\_

Classroom Interactions/Work Habits	Always	Usually	Sometimes	Rarely	Never
Has age-appropriate attention span					
Is able to focus and stay on task					
Enjoys learning					
Is imaginative					
Follows directions					
Tries new class activities willingly					
Seeks help when necessary					
Disturbs others while working					
Contributes to class discussion					
Completes assigned tasks in allotted time					
Respects classroom rules/routines					

Comments \_\_\_\_\_

(over)

## SECTION 2A: APPLICANTS FOR GRADES TK, K, & 1 ONLY

Classroom	Always	Sometimes	Never
Plays alone happily			
Takes turns and shares			
Initiates play activities			
Cooperates in play			
Physical Development	Above Age	Appropriate for Age	Young for Age
Small muscle control & coordination (fine motor)			
Large muscle control & coordination (gross motor)			
Speech & articulation			
Comments:			
Considering the total child (social, emotional, intellectual, physical) compared to peers at school, how would you assess the child's readiness for the grade to which he/she is applying?			
<input type="checkbox"/> More ready than peers <input type="checkbox"/> As ready as peers <input type="checkbox"/> Less ready than peers			

## SECTION 2B: APPLICANTS FOR GRADES 2-6 ONLY

Classroom Work Habits	Always	Sometimes	Never
Works well independently			
Works well in groups			
Is thorough in completing assignments			
Is punctual in completing assignments			
Skills	Above Average	Average	Below Average
Reading skills			
Writing skills			
Math Facts/Computation skills			
Problem-Solving skills			
Oral expression			
Leadership skills			
Organization skills			
Comments:			

## SECTION 3: APPLICANTS FOR GRADES TK-6

Family Information	Always	Sometimes	Never
Communicates with teacher(s)			
Cooperates with classroom teacher(s)			
Participates in school activities			
Adheres to rules and policies of the school			

Comments \_\_\_\_\_

Do the parents have reasonable expectations of the school? \_\_\_\_\_

Are the parents' social and academic expectations of their child age appropriate? \_\_\_\_\_

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

## SECTION 4: APPLICANTS FOR GRADES TK–6

1. Please comment on the emotional maturity and integrity of the applicant. \_\_\_\_\_  
\_\_\_\_\_
2. Please list the applicant's talents and/or strengths. \_\_\_\_\_  
\_\_\_\_\_
3. Please comment on the applicant's artistic and creative thinking abilities. \_\_\_\_\_  
\_\_\_\_\_
4. How does the applicant contribute to the class and/or school environment? \_\_\_\_\_  
\_\_\_\_\_
5. To your knowledge, does the applicant have any impairment in speech, hearing, vision, or physical coordination? \_\_\_\_\_  
\_\_\_\_\_
6. To your knowledge, does the applicant require special assistance/accommodations to meet academic requirements (e.g., tutoring)? \_\_\_\_\_  
\_\_\_\_\_
7. What advice would you offer a colleague working with this student? \_\_\_\_\_  
\_\_\_\_\_
8. Is there any additional information that would be helpful to the Admission committee in considering this student? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please call or e-mail me to discuss this applicant further.  Yes  No

Best time of day to reach me \_\_\_\_\_

Your name (please print) \_\_\_\_\_

Title/Position \_\_\_\_\_ School/Company \_\_\_\_\_

Phone (w) \_\_\_\_\_ Phone (h) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Thank you for your assistance. Please note that references must be received before a decision can be made. Persons completing the reference must mail it directly to Trinity to ensure confidentiality. Please mail this form to:**

TRINITY SCHOOL

Admission Office

4011 Pickett Road, Durham, North Carolina 27705

Phone: (919) 402-8262 Fax: (919) 402-0762



TRINITY SCHOOL OF DURHAM AND CHAPEL HILL  
REFERENCE #2

Name of Applicant \_\_\_\_\_  
 Applicant for Grade \_\_\_\_\_  
 Applying for Academic Year \_\_\_\_\_  
 Applicant's Current Grade \_\_\_\_\_ Current Academic Year \_\_\_\_\_

**All information on this reference form is considered CONFIDENTIAL**

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**Grades 2–6 applicant references complete Sections 1, 2B, 3, and 4**

What is your relationship to the applicant? \_\_\_\_\_  
 How long have you known the applicant? \_\_\_\_\_

**SECTION 1: APPLICANTS (TK-6)**

Social Development	Always	Usually	Sometimes	Rarely	Never
Is open to friendship					
Has a tendency to lead					
Has a tendency to follow					
Is imaginative					
Adjusts to changes in routine					
Exhibits positive attitude toward teacher(s)					
Exhibits positive attitude toward peer(s)					
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Resolves problems with physical aggression					
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Comments \_\_\_\_\_

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Contributes to class discussion					
Completes assigned tasks in allotted time					
Respects classroom rules/routines					

Comments \_\_\_\_\_

(over)

## SECTION 2A: APPLICANTS FOR GRADES TK, K, & 1 ONLY

Classroom	Always	Sometimes	Never
Plays alone happily			
Takes turns and shares			
Initiates play activities			
Cooperates in play			
Physical Development	Above Age	Appropriate for Age	Young for Age
Small muscle control & coordination (fine motor)			
Large muscle control & coordination (gross motor)			
Speech & articulation			
Comments:			
Considering the total child (social, emotional, intellectual, physical) compared to peers at school, how would you assess the child's readiness for the grade to which he/she is applying?			
<input type="checkbox"/> More ready than peers <input type="checkbox"/> As ready as peers <input type="checkbox"/> Less ready than peers			

## SECTION 2B: APPLICANTS FOR GRADES 2-6 ONLY

Classroom Work Habits	Always	Sometimes	Never
Works well independently			
Works well in groups			
Is thorough in completing assignments			
Is punctual in completing assignments			
Skills	Above Average	Average	Below Average
Reading skills			
Writing skills			
Math Facts/Computation skills			
Problem-Solving skills			
Oral expression			
Leadership skills			
Organization skills			
Comments:			

## SECTION 3: APPLICANTS FOR GRADES TK-6

Family Information	Always	Sometimes	Never
Communicates with teacher(s)			
Cooperates with classroom teacher(s)			
Participates in school activities			
Adheres to rules and policies of the school			

Comments \_\_\_\_\_

Do the parents have reasonable expectations of the school? \_\_\_\_\_

Are the parents' social and academic expectations of their child age appropriate? \_\_\_\_\_

(next page)

## SECTION 4: APPLICANTS FOR GRADES TK–6

1. Please comment on the emotional maturity and integrity of the applicant. \_\_\_\_\_  
\_\_\_\_\_
2. Please list the applicant's talents and/or strengths. \_\_\_\_\_  
\_\_\_\_\_
3. Please comment on the applicant's artistic and creative thinking abilities. \_\_\_\_\_  
\_\_\_\_\_
4. How does the applicant contribute to the class and/or school environment? \_\_\_\_\_  
\_\_\_\_\_
5. To your knowledge, does the applicant have any impairment in speech, hearing, vision, or physical coordination? \_\_\_\_\_  
\_\_\_\_\_
6. To your knowledge, does the applicant require special assistance/accommodations to meet academic requirements (e.g., tutoring)? \_\_\_\_\_
7. What advice would you offer a colleague working with this student? \_\_\_\_\_  
\_\_\_\_\_
8. Is there any additional information that would be helpful to the Admission committee in considering this student? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please call or e-mail me to discuss this applicant further.  Yes  No

Best time of day to reach me \_\_\_\_\_

Your name (please print) \_\_\_\_\_

Title/Position \_\_\_\_\_ School/Company \_\_\_\_\_

Phone (w) \_\_\_\_\_ Phone (h) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Thank you for your assistance. Please note that references must be received before a decision can be made. Persons completing the reference must mail it directly to Trinity to ensure confidentiality. Please mail this form to:**

### TRINITY SCHOOL

Admission Office  
4011 Pickett Road, Durham, North Carolina 27705

Phone: (919) 402-8262 Fax: (919) 402-0762

TRINITY SCHOOL OF DURHAM AND CHAPEL HILL  
TRANSCRIPT RELEASE

Student's Name \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Current Grade \_\_\_\_\_ Current Academic Year \_\_\_\_\_  
(Month) (Day) (Year)

School Releasing Transcripts \_\_\_\_\_  
Name of School

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

School Telephone \_\_\_\_\_

PERMISSION FOR RELEASE OF INFORMATION

Parents/guardians: Please complete this form and submit it to the applicant's school, and the school will send the applicable records directly to Trinity School.

I hereby grant permission to \_\_\_\_\_ (applicant's current school) to release copies of my child's school records to Trinity School for purposes of evaluation for admission.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**School Administrator**, please provide copies of all applicable records:

- Scholastic records
- Standardized test scores (if any)
- North Carolina End-of-Grade (EOG) scores
- Health record
- Attendance information
- Educational evaluations (if any)
- Individualized Education Plans (if any)
- Discipline reports (if any)
- Psychological/Educational evaluation (if any)
- Additional information as may be required

**Thank you for your assistance. Please mail this form with the requested information to:**

TRINITY SCHOOL  
Admission Office  
4011 Pickett Road  
Durham, North Carolina 27705

Phone: (919) 402-8262 Fax: (919) 402-0762