

APPLICANT INFORMATION

Date		Applying for Grade	
Student's Name	rudent's Name Nicknam		
Date of Birth	Age	Preferred Gend	er
Home Address		Phone	
City	State	ZIP	
Parent Name		<u> </u>	
Address			
hone Alt. ph		Alt. phone	
Email Address			
Relationship to student			
Parent Name			
Address			
hone		Alt. phone	
Email Address			
Relationship to student			
Student lives with:	% of time		
Current School			
Address			
Phone			
Siblings Name		Preferred Gender	Age
Storings Hame		Tierenea Genael	1150



Parent Questionnaire Please answer on a separate piece of paper

- 1. In a sentence or two, explain your motivations for choosing to send your child to TMS (as opposed to a more 'conventional' school).
- 2. Please describe any special circumstances that have affected you child's education.
- 3. How would you describe your child's attitude towards school?
- 4. What do you think is your child's favorite school subject?
- 5. What do you think is your child's favorite extracurricular activity?
- 6. In your opinion, what should be the primary objectives of middle school education (e.g. factual knowledge, creative development, organizational & study skills, environmental education, test prep, etc.)?
- 7. In your opinion, what aspects of education should not be part of the middle school experience?
- 8. In terms of total hours and minutes, how much homework do you think should be assigned each evening?
- 9. In terms of hours and minutes, how much time each evening are you prepared to give, to help your child with their schoolwork?
- 10. What is your opinion on using the Internet as a resource? What is your policy in relation to your child's personal use of the Internet?
- 11. In your experience, which style(s) of work does your child seem to enjoy doing the most? Group activities? Larger projects? Quick, nightly homework? Creative endeavors?
- 12. Up to this point, are there any teaching styles (e.g., hands-on activities, lectures, one-on-one tutoring, seminar-style discussion) that really seemed to 'click' with your child? Did any not work at all?
- 13. If possible, briefly describe (one of) your child's favorite teachers, and tell us why they liked them so much.
- 14. How much does your child talk to you each evening about the happenings of the day?
- 15. How connected do you feel to what goes on at your child's school? Are there any ways you would like that to be different?



STUDENTS

Please write about yourself and/or draw a picture,				
illustrating something special about you!				

You may attach a separate piece of paper if you wish.



Teacher Comments

Dear Teacher:		
Your student,, Mountain School. We would appreciate any insightfu	is considering attending To l comments you could provi	panga ide.
The information you provide will remain strictly conf	ïdential.	
Please return this hard copy to Topanga Mountain Scl joy@topangamountainschol.org	hool or email admissions at	
Thank you.		
Teacher Name:	Taught student for	year(s)
School:	Position:	