



## **2023-2024 Upper Grades Application**

### **Application Process:**

1. Attend an Open House or request a private tour. Please call (941)-479-2651 or email [saltmeadowschool@gmail.com](mailto:saltmeadowschool@gmail.com) to make an appointment.
2. Submit an application. All applications must be accompanied by a \$25 non-refundable application fee.
3. Shortly after your application is received, the Admissions Director will contact you to schedule a shadow day for your child to attend school for a day to experience the Saltmeadow program.
4. Upon acceptance, a \$100 tuition deposit and signed registration paperwork will finalize your child's enrollment and hold their space.

### **Student's Name:**

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### **Address:**

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**Birthdate:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Homeschool Enrichment:** ☐ **Number of days (1-4)** \_\_\_\_\_

**Yearly tuition: \$8700 plus \$300 for registration.**

### **Homeschool Enrichment:**

2 Day: \$4000 plus \$300 registration fee.

3 Day: \$6000 plus \$300 registration fee. 4 Day: \$7700 plus \$300 registration fee.

There is a **5%** discount on tuition, if paid in full at enrollment. Tuition may also be paid in 10 installments, beginning August 1<sup>st</sup>.

Party responsible for tuition obligations: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Parent/Guardian Information**

**Parent/Guardian 1:** \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

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

Place of work: \_\_\_\_\_

**Parent/Guardian 2:** \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

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

Place of work: \_\_\_\_\_

## **Relationship of Parents:**

☐ Married ☐ Divorced ☐ Separated ☐ Co-habiting

If separated or divorced, please describe co-parenting /custody arrangement:

\_\_\_\_\_

## **Child lives with:**

☐ Both Parents ☐ Parent 1 ☐ Parent 2 ☐ Other

If your child lives with anyone other than parent(s), please explain:

\_\_\_\_\_

## **Does any other person care for your child on a regular basis?**

☐ Yes ☐ No

\_\_\_\_\_

Caregiver's Name \_\_\_\_\_ Phone \_\_\_\_\_

Caregiver's Relationship to Child : \_\_\_\_\_

## **Siblings**

Sibling 1 Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

School: \_\_\_\_\_

Sibling 2 Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

School: \_\_\_\_\_

Sibling 3 Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_

School: \_\_\_\_\_

## **Schools Previously Attended**

School 1 Name, Address, Phone

\_\_\_\_\_

School 2 Name, Address, Phone

\_\_\_\_\_

School 3 Name, Address, Phone

\_\_\_\_\_

If moving from a previous school, please explain why:

\_\_\_\_\_

If your child was adopted, at what age? Under what circumstances?

\_\_\_\_\_

Please describe your family's relationship to spiritual life:

\_\_\_\_\_

How many hours does your child sleep each night? \_\_\_\_\_

Why do you want your child to attend Saltmeadow School?

\_\_\_\_\_

How did you hear of Saltmeadow School?

☐ Website   ☐ Facebook   ☐ Friend   ☐ Newspaper

☐ Magazine   ☐ Open House   ☐ Event   ☐ Other

If "Other", how:

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Are you acquainted with anyone currently in the school?

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Parents/guardians are actively involved in the life of our school. All are expected to volunteer a minimum of 20 hours per school year and participate in at least one school work day. Please list your interests, experience, talents, etc.

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Anything that would be helpful for us to know concerning your child's development not mentioned so far?

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Please describe your child's strengths and challenges:

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Does your child have any health/medical conditions that the school should be aware of in order to ensure the child's safety? If so, please explain and attach any medical documents.

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Has your child ever had a social, neurological, emotional, or other evaluation? Does your child have an IEP? If so, please explain and attach the testing results or latest IEP plan.

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Does your child receive any support services at this time? Please list, along with contact information for the provider.

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How many hours per day does your child spend with electronic media?

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What kinds of activities does your child enjoy most?

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List any extracurricular activities your child participates in (sports, martial arts, dance, music).  
Indicate hours per week:

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Does your child have any unusual behaviors or habits that the teachers should be aware of? Please describe.

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Please describe your approach to discipline. How does your child respond to your approach?

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What activities does your family do together that your child enjoys?

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Please describe home life or attitudes that you consider different or unique:

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The following page is a request for release of records from the previously attended school. Please sign and submit it with the application. Prior school records are required before an application can be approved. In some cases, parents must encourage the previous school to send or fax records.

Homeschool transcripts are appreciated, if available.



## Request for Student Records

Previous School Name: \_\_\_\_\_

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

School Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Student Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

The above named student has applied to/is enrolled in Saltmeadow School. Please forward all school records.

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

Date of request: \_\_\_\_\_

Please send records to:

Saltmeadow School/ Attn: Records

6210 Crestwood Ave Sarasota, FL 34231

[saltmeadowschool@gmail.com](mailto:saltmeadowschool@gmail.com)

Phone: ( 941)-479-2651 Fax: 941-927-2006