



**Family Information**

Parents' Marital Status: Married\_\_\_\_ Separated\_\_\_\_ Divorced\_\_\_\_ Widowed/Widower\_\_\_\_ Single\_\_\_\_

Who has legal custody of the applicant? \_\_\_\_\_

To whom should correspondence be addressed?\_\_\_\_\_

Who is financially responsible for this applicant? \_\_\_\_\_

**Parent / Guardian 1**

Name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Education (highest level) \_\_\_\_\_

Occupation \_\_\_\_\_

Business \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Best way to reach you:

\_\_\_\_\_

**Stepparent 1**

Name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Education (highest level) \_\_\_\_\_

Occupation \_\_\_\_\_

Business \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Best way to reach you:

\_\_\_\_\_

**Parent / Guardian 2**

Name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Education (highest level) \_\_\_\_\_

Occupation \_\_\_\_\_

Business \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Best way to reach you:

\_\_\_\_\_

**Stepparent 2**

Name \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_

Education (highest level) \_\_\_\_\_

Occupation \_\_\_\_\_

Business \_\_\_\_\_

Home Phone: \_\_\_\_\_

Best way to reach you:

Cell Phone: \_\_\_\_\_

\_\_\_\_\_

List any relatives who attended Friends School.

If someone referred you, please indicate below so we may thank them.

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

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

Please list siblings and schools that they are currently attending.

What information should Friends School have to meet your child's particular needs?

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

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

Why do you want the applicant to attend Friends School?

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

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

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

How long do you plan to have the applicant attend Friends School?

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

How did you first learn about Friends School?

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

**Applicant's Academic Information**

Current School \_\_\_\_\_ Current Grade Level \_\_\_\_\_

Please list all schools attended in past 3 years:

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

Has the student ever been home schooled? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list program/curriculum \_\_\_\_\_

Has student ever been expelled or asked to withdraw from a school? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain:

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

Has the applicant ever had educational testing? Yes\_\_\_\_\_ No\_\_\_\_\_ Date\_\_\_\_\_

Has the applicant ever had psychological testing? Yes\_\_\_\_\_ No\_\_\_\_\_ Date\_\_\_\_\_

Has the applicant ever had an IEP? Yes\_\_\_\_\_ No\_\_\_\_\_ Date\_\_\_\_\_

Has the applicant ever had a 504? Yes\_\_\_\_\_ No\_\_\_\_\_ Date\_\_\_\_\_

***If you answered "yes" to any of the questions above, please attach a copy of documentation accordingly.***

Please list any advanced or gifted programs in which the applicant participates.

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Please detail any special needs the applicant requires. (e.g. disabilities, food allergies, tutoring)

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List the applicant's academic, artistic or athletic interests.

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### **Consent**

***A \$100.00 non-refundable application fee is due with this Application for Admission.  
Please make checks payable to Friends School.***

By submitting this application for consideration by the admissions committee, I certify that this information is accurate to the best of my knowledge. Furthermore, I understand that the Admissions Committee may recommend that the applicant have additional testing administered through The Learning Center, for an additional non-refundable fee of \$150.00 payable prior to the day of scheduled testing. It is understood that the information contained in this application, and that which either the school or the applicant family requests, is confidential and shall not be disclosed to anyone beyond those involved in the admissions process.

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**Parent/Guardian 1**

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**Date**

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**Parent/Guardian 2**

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**Date**



# VIRGINIA BEACH FRIENDS SCHOOL

*Knowledge. Character. Community.*

## Middle School APPLICANT QUESTIONNAIRE

Date of Application: \_\_\_\_\_

Date of Proposed Entrance: \_\_\_\_\_

### Student's Name:

\_\_\_\_\_

Last

\_\_\_\_\_

First

\_\_\_\_\_

Middle

Favorite academic subjects: \_\_\_\_\_

\_\_\_\_\_

Academic courses you hope to take next year: \_\_\_\_\_

\_\_\_\_\_

Describe community activities or services in which you have been involved: \_\_\_\_\_

\_\_\_\_\_

Reading interests: \_\_\_\_\_

\_\_\_\_\_

Athletic interests and experiences: \_\_\_\_\_

\_\_\_\_\_

Creative art interests and experiences: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Work experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want to change schools? \_\_\_\_\_  
\_\_\_\_\_

Why do you want to attend Friends School? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you think you will contribute to our school community? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Thank you for completing this form. Your remarks will have a direct bearing on your application, and we will consider them carefully.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# VIRGINIA BEACH FRIENDS SCHOOL

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## **FRIENDS SCHOOL**

1537 Laskin Road  
Virginia Beach, VA 23451  
Telephone: 757.428.7534 Fax: 757.428.7511  
Email: [tamra@vbfschool.org](mailto:tamra@vbfschool.org)  
[www.vbfschool.org](http://www.vbfschool.org)

## **Authorization for Release of Records**

Please sign and return to the Director of Admissions with application and application fee

Name of Current School: \_\_\_\_\_

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

School Registrar Email: \_\_\_\_\_

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

Student's Name: \_\_\_\_\_

Has applied for enrollment to Friends School for the \_\_\_\_\_ school year.

Please forward all **academic, psychological, behavioral and discipline**  
records for said named student.  
(Please include IEP and 504 if applicable.)

Students DOB: \_\_\_\_\_

Current Grade: \_\_\_\_\_ Time enrolled in current school: \_\_\_\_\_

I hereby authorize the release of all academic records, psychological records, discipline records, test scores and health records to Virginia Beach Friends School. Please include all confidential records.

\_\_\_\_\_  
Printed name of Parent and/or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature name of Parent and/or Guardian



# VIRGINIA BEACH FRIENDS SCHOOL

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## Middle and Upper School Teacher Recommendation - ENGLISH

\_\_\_\_\_ has applied for admission to Friends School. Your honest assessment of this student's character and academic abilities would be greatly appreciated. All of the information you provide will be confidential. Thank you in advance for your assistance.

How long have you known this applicant?

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How well do you know this applicant academically?

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<b>Academic Ability</b>	<b>Above Average</b>	<b>Average</b>	<b>Fair</b>	<b>Poor</b>	<b>No basis for comparison</b>
Class Participation					
Academic Curiosity					
Critical Thinking					
Academic Motivation					
Effort					
Ability to think and work independently					
Follows oral and written direction					
Reading Comprehension					
Discussion/Oral Skills					
Listening Skills					
Vocabulary					
Self-Confidence					
Cooperation with Adults					
Response to Criticism					
Leadership					



Primary strengths and weaknesses:

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Study skills (organization, homework and test preparation, time management, concentration):

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Academic potential versus achievement level:

---

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Overall personality (individuality, sense of humor, friendliness, etc.):

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Any areas from the checklists that may need further elaboration:

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**Parent Involvement**

Please describe the applicant's parents school involvement:

\_\_\_ uninvolved      \_\_\_involved      \_\_\_ over-involved

How realistic are the applicant's parents regarding their child's academic abilities?

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How supportive are the parents of the school and its programs?

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Additional comments for the Admissions Committee:

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Thank you. Your feedback is an important part of the admissions process and is appreciated. If you have any questions or comments, please feel free to contact The Director of Admissions at 757-428-7534 Ext. 104.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email

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

\_\_\_\_\_  
Phone Number



# VIRGINIA BEACH FRIENDS SCHOOL

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## Middle and Upper School Teacher Recommendation - MATH

\_\_\_\_\_ has applied for admission to Friends School. Your honest assessment of this student's character and academic abilities would be greatly appreciated. All of the information you provide will be confidential. Thank you in advance for your assistance.

How long have you known this applicant?

\_\_\_\_\_

How well do you know this applicant academically?

\_\_\_\_\_

<b><u>Academic Ability</u></b>	<b><u>Above Average</u></b>	<b><u>Average</u></b>	<b><u>Fair</u></b>	<b><u>Poor</u></b>	<b><u>No basis for comparison</u></b>
Class Participation					
Academic Curiosity					
Critical Thinking					
Academic Motivation					
Effort					
Ability to think and work independently					
Follows oral and written direction					
Reading Comprehension					
Discussion/Oral Skills					
Listening Skills					
Vocabulary					
Self-Confidence					
Cooperation with Adults					
Response to Criticism					
Leadership					

Primary strengths and weaknesses:

---

---

Study skills (organization, homework and test preparation, time management, concentration):

---

---

Academic potential versus achievement level:

---

---

Overall personality (individuality, sense of humor, friendliness, etc.):

---

---

Any areas from the checklists that may need further elaboration:

---

---

**Parent Involvement**

Please describe the applicant's parents school involvement:

\_\_\_ uninvolved \_\_\_involved \_\_\_ over-involved

How realistic are the applicant's parents regarding their child's academic abilities?

---

How supportive are the parents of the school and its programs?

---

Additional comments for the Admissions Committee:

---

---

Thank you. Your feedback is an important part of the admissions process and is appreciated. If you have any questions or comments, please feel free to contact The Director of Admissions at 757-428-7534 Ext. 104.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Email

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

\_\_\_\_\_  
Phone Number



# VIRGINIA BEACH FRIENDS SCHOOL

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## Middle/Upper School PERSONAL REFERENCE

*(Principal, Employer, Coach, Pastor, etc.)*

Student's Name: \_\_\_\_\_  
Last First Middle

Your Name: \_\_\_\_\_

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

Your relationship to student: \_\_\_\_\_

How long you have known the student: \_\_\_\_\_

Please check the appropriate box for each item below:

	<b>Above Average</b>	<b>Average</b>	<b>Fair</b>	<b>Poor</b>	<b>No basis for comparison</b>
Manners					
Dependability					
Compatibility with peers					
Compatibility with adults					
Relative maturity					
Common sense					
Vitality					
Strength of character					
Sense of humor					
Overall evaluation					

Please describe the activity or job in which you have supervised the applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please comment candidly on the student's imagination, originality, creativity, and resourcefulness:  
\_\_\_\_\_  
\_\_\_\_\_

Dedication to the activity or job: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sense of service and concern for others: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Unusual strengths and/or weaknesses:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In what way do you believe the applicant could make a contribution to Friends School?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Thank you for completing this form. Your remarks will have a direct bearing on your application, and we will consider them carefully.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date