



2150 Butler Pike | Plymouth Meeting, PA 19462
info@pmfs1780.org | 610.828.2288

Application for Admission

Applicant Information

Legal Name _____
First Last Middle

Prefers to be Called _____ Gender _____

Date of Birth _____ Date of Adoption _____

Current School _____ Years of Attendance _____ Current Grade _____

Applying for: _____ Application for School Year _____

Early Childhood — please specify: Caterpillars (3+)* Butterflies (4+)*

Kindergarten (5+)* First Grade Second Grade Third Grade Fourth Grade Fifth Grade Sixth Grade

* Open to children whose birthday comes before September 15.

Household Information

Applicant resides in: One Household Two Households

Parents/Guardians are: Married Single Partnered Separated Divorced

Household 1

Home Address _____

School District of Residence _____

Parent/Guardian Name 1 _____

Relationship to Applicant _____

E-mail Address _____

Phone Number _____ Home Cell Work

Phone Number _____ Home Cell Work

Occupation _____

Employer _____

If applicable, Name 2 _____

Relationship to Applicant _____

E-mail Address _____

Phone Number _____ Home Cell Work

Phone Number _____ Home Cell Work

Occupation _____

Employer _____

If applicable, please specify custody arrangements _____

Household 2

Home Address _____

School District of Residence _____

Parent/Guardian Name 1 _____

Relationship to Applicant _____

E-mail Address _____

Phone Number _____ Home Cell Work

Phone Number _____ Home Cell Work

Occupation _____

Employer _____

If applicable, Name 2 _____

Relationship to Applicant _____

E-mail Address _____

Phone Number _____ Home Cell Work

Phone Number _____ Home Cell Work

Occupation _____

Employer _____

Siblings of Applicant

Name Date of Birth Current School Household #

Name Date of Birth Current School Household #

Name Date of Birth Current School Household #

Other Information

Optional Information Requested

Racial Identity/Ethnicity _____

Primary Language _____ Secondary Language _____ ESL

Religion _____ If Quaker, please indicate Monthly Meeting _____

Do you intend to apply for financial aid? Yes No Unsure

Information about financial aid is available at pmfs1780.org/financialaid.

How did you first hear about PMFS?

- Current PMFS Parent PMFS Alumni/Alumni Parent PMFS Website News Article
 Internet Search Flyer in the Community Advertisement Drive-by

Family Members or Acquaintances Who Have Attended PMFS

Name _____ Relationship _____ Years Attended _____

Name _____ Relationship _____ Years Attended _____

What drew you to Plymouth Meeting Friends School?

Please tell us about your child. Describe your child's social, emotional, and physical development.

What do you consider to be your child's strengths as well as areas for continued growth?

What are your goals for your child while in attendance at Plymouth Meeting Friends School?

Describe your child's home life including relationships with siblings and/or individuals living in the same household(s).

Are there any learning challenges or social, emotional, behavioral, or physical factors about which we should know? If so, please explain.

Has your child received a speech-language, occupational therapy, psychological, or psychoeducational evaluation? If yes, please indicate the type of testing, date, and name of person who administered it:

To what other schools are you applying?

Plymouth Meeting Friends School has my permission to contact my child's teacher for information concerning his or her academic, emotional, and intellectual development. I understand that the admission process includes an age-appropriate academic assessment of my child.

Signature of Parent/Guardian _____ Date _____

Please return completed application to the Admission Office along with the \$50 application fee.

Plymouth Meeting Friends School does not discriminate against applicants on the basis of sex, race, religious belief, ethnicity, or national origin.