



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 at 1-800-446-0320)
- 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 (Applicant must register with the ISEE Operations Office at 1-800-446-0320), PSAT, SAT, or ACT scores
- Half-Day Classroom Visit and Interview

Separate Application

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)

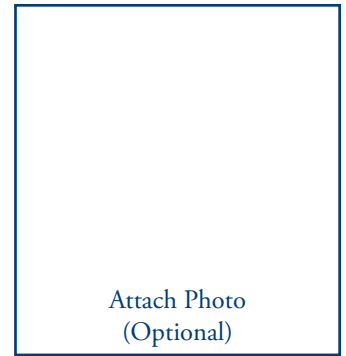
GRADES 3–4

- 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)

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 at 1-800-446-0320)
- Half-day Classroom Visit
- Interview (applicants for grade 6 only)

TRINITY SCHOOL ADMISSION APPLICATION



Application for 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 heard 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? _____

| |
|--|
| <p><i>Please complete the information below if your child has attended his/her present school for less than 2 years:</i></p> <p>Name of Previous School _____</p> <p>School Address _____ <i>Street City State Zip Telephone</i></p> <p>Grades Completed _____</p> |
|--|

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? _____

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 \$65, Grades 5–12**
 Complete questionnaire, Grades 7–12 Copy of birth certificate
 Submitted transcript release form to applicant's current school
 Registered for ISEE exam (with Admission office consent, older applicants may substitute with PSAT, SAT, or similar test)
 Submitted reference form to teachers, who must mail form directly to Trinity School

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 meet the priority deadline will be notified by mail **February 15, 2013**.
Grades 2–8: Applicants who meet the priority deadline will be notified by mail **March 8, 2013**.
Grades 9–12: Applicants who meet the priority deadline will be notified by mail **March 22, 2013**.

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. Applicants for grades 7–12 should request references to be completed by the student's current or most recent English and mathematics teachers. References should be mailed directly to Trinity by the teacher completing the form.

| | | | | | |
|--|----------------------|----------------------|-------------|--------------|-----------------|
| ENGLISH REFERENCE | | | | | |
| Name _____ | Position/Title _____ | | | | |
| School/Employer _____ | | | | | |
| Address _____ | | | | | |
| | <i>Street</i> | | <i>City</i> | <i>State</i> | <i>Zip Code</i> |
| Work Telephone _____ | | Home Telephone _____ | | | |
| How does this person know the applicant? _____ | | | | | |

| | | | | | |
|--|----------------------|----------------------|-------------|--------------|-----------------|
| MATH REFERENCE | | | | | |
| Name _____ | Position/Title _____ | | | | |
| School/Employer _____ | | | | | |
| Address _____ | | | | | |
| | <i>Street</i> | | <i>City</i> | <i>State</i> | <i>Zip Code</i> |
| Work Telephone _____ | | Home Telephone _____ | | | |
| How does this person know the applicant? _____ | | | | | |

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 go to the Financial Aid page under the Admission tab of the Trinity School website (www.trinityschoolnc.org).

Priority deadlines for admission and financial aid applications are:

TK–Grade 1: **January 7, 2013**

Grades 2–12: **January 18, 2013**

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.

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
APPLICANT QUESTIONNAIRE

This is an informal questionnaire to be completed by each applicant for grades 7–12. Your responses will give us the chance to get to know you. Please complete the questionnaire in your own handwriting and without assistance from anyone.

Name _____
Last First Middle Preferred

Sex: Male Female Birth Date ____ / ____ / ____ Age _____

Current Grade _____ Current School _____

1. What class do you enjoy the most this year? _____

2. What class do you enjoy the least this year? _____

3. Name two books other than ones required by your school that you have recently read. _____

4. Within the past two years, have you participated on an athletic team? Yes No If yes, indicate type(s) of team sport(s).

5. Within the past two years, have you participated in any fine arts activities (e.g., chorus, dance, drama)? Yes No

If yes, indicate type(s) of fine art activity(ies). _____

6. Do you play any musical instruments? Yes No If yes, indicate the instrument(s) and how long you have played.

7. Within the past two years, have you participated in any community activities (e.g., community service, scouting, church youth group)? Yes No If yes, indicate the type(s) of community activity(ies). _____

8. You are welcome to share other interests and/or hobbies that you have. _____

ESSAY QUESTION

We value rich thinking and clear, eloquent expression. In your own handwriting and on a separate sheet of paper, write approximately three or four thoughtful, well-crafted paragraphs on one of the following three questions:

- (1) Choose a book you love and explain why you love it,
- (2) Write about something you love to do and explain why you love it, or
- (3) Write about a time when you learned a valuable lesson, explaining what you learned and how you learned it.

Please complete this form and mail it with your completed application to:

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

TRINITY SCHOOL OF DURHAM AND CHAPEL HILL
ENGLISH REFERENCE

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. Thank you for completing this form thoughtfully and as fully as possible. The information you provide is important: It will help us understand this applicant and his or her potential fit as a Trinity student. Our desire is to create, to the best of our abilities, the optimal match of student, school, and placement.

What is your relationship to the student? _____
 How long have you known the student? _____

| | Check one descriptor in each row | | | | |
|---------------------------------------|----------------------------------|-----------|------|------|------|
| | Outstanding | Excellent | Good | Fair | Poor |
| Academic ability | | | | | |
| Independent work and study habits | | | | | |
| Self-motivation | | | | | |
| Integrity | | | | | |
| Conduct, courtesy, respect for others | | | | | |
| Leadership ability | | | | | |
| Responsibility | | | | | |

Comments _____

| | Circle one descriptor in each row | | | | |
|-----------------------|-----------------------------------|---------------------------------|--------------------------------------|-----------------------------|---------------------------------------|
| | Intellectual curiosity | Keen in many areas | Lively in one or two areas | Generally thoughtful | Normal for age, but sporadic |
| Reading habits | Reads voraciously | Discriminating but not avid | Adequate skill but little enthusiasm | Reads only under pressure | Does not complete reading assignments |
| Reading comprehension | Insightful and critical reader | Good | Adequate | Poor | Deficient |
| Writing ability | Has good ideas, well-presented | Good technique but not original | Adequate and readable prose | Technically weak or awkward | Unimaginative and unskilled |

Comments _____

Ability level of current course: Honors Other Advanced Level (please specify) _____ College Prep Regular
 Remedial Not Sectioned

Which English level would you recommend for this student? Remedial Regular Honors

How does the student rank academically in comparison with the rest of the class? _____

How does the student's achievement correlate with his or her academic potential? _____

Please comment on the student's degree of cooperation: Extremely Cooperative Cooperative Not Cooperative

Does the student currently receive tutoring or remedial support? If so, to what extent? _____

Is the student enrolled in any special programs? Yes No If yes, please explain. _____

To your knowledge, does the student require special assistance/accommodations to meet academic requirements? _____

Please comment on the student's strengths and weaknesses in English class. _____

How well does the student accept advice or criticism? _____

Does the student have any emotional issues that hinder academic or social success? If so, please explain. _____

Are the parents' social and academic expectations of their child age-appropriate? _____

How does the student contribute to the class and/or school environment? _____

Has any disciplinary action been taken regarding this student? Yes No If yes, please explain. _____

Is the student in good standing and eligible to remain in or reenter your school? Yes No If no, please explain. _____

What advice would you offer a colleague working with this student? _____

Is there any additional information that would be helpful to the Admission committee in considering this student? _____

Considering all aspects of this candidate, how do you recommend him/her for admission to Trinity School?

Enthusiastically Strongly Without Reservation With Reservation Not Recommended

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 MATH REFERENCE

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. Thank you for completing this form thoughtfully and as fully as possible. The information you provide is important: It will help us understand this applicant and his or her potential fit as a Trinity student. Our desire is to create, to the best of our abilities, the optimal match of student, school, and placement.

What is your relationship to the student? _____

How long have you known the student? _____

| | Check one descriptor in each row | | | | |
|---------------------------------------|----------------------------------|-----------|------|------|------|
| | Outstanding | Excellent | Good | Fair | Poor |
| Academic ability | | | | | |
| Independent work and study habits | | | | | |
| Self-motivation | | | | | |
| Integrity | | | | | |
| Conduct, courtesy, respect for others | | | | | |
| Leadership ability | | | | | |
| Responsibility | | | | | |

Comments _____

| | Circle one descriptor in each row | | | | |
|--------------------|---|--|---|--|--|
| | Reasoning ability, critical & creative thinking skills, & complex problem solving are exceptional | Has very good critical and problem-solving thinking skills | Average ability to synthesize and process ideas | Mostly literal, shows some ability for critical thinking | Uses only literal thinking processes |
| Analytical ability | | | | | |
| Math skills | Understanding of math concepts and skills is exceptional | Is above average in math ability | Has mastered skills and concepts on grade level | Math concepts can eventually be mastered with help | Computation and comprehension skills below grade level |

Comments _____

What math text and/or curriculum is used in your class? _____

Ability level of current course: Honors Other Advanced Level (please specify) _____ College Prep Regular
 Remedial Not Sectioned

What is the next logical math course that you would recommend for this student? _____

Which math level would you recommend for this student? Remedial Regular Honors

How does the student rank academically in comparison with the rest of the class? _____

How does the student's achievement correlate with his or her academic potential? _____

Please comment on the student's degree of cooperation: Extremely Cooperative Cooperative Not Cooperative

Does the student currently receive tutoring or remedial support? If so, to what extent? _____

To your knowledge, does the student require special assistance/accommodations to meet academic requirements? _____

Please comment on the student's strengths and weaknesses in math class. _____

How well does the student accept advice or criticism? _____

Does the student have any emotional issues that hinder academic or social success? If so, please explain. _____

Are the parents' social and academic expectations of their child age-appropriate? _____

How does the student contribute to the class and/or school environment? _____

Has any disciplinary action been taken regarding this student? Yes No If yes, please explain. _____

Is the student in good standing and eligible to remain in or reenter your school? Yes No If no, please explain. _____

What advice would you offer a colleague working with this student? _____

Is there any additional information that would be helpful to the Admission committee in considering this student? _____

Considering all aspects of this candidate, how do you recommend him/her for admission to Trinity School?

Enthusiastically Strongly Without Reservation With Reservation Not Recommended

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 (including at least two years of end-of-year reports)
- Standardized test scores (if any)
- 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

