

# Berkeley Rose Waldorf School

## Application for Early Childhood Programs

APPLICATION FOR ADMISSION, FALL 2018

Mailing Address: 1442 A Walnut St. #395, Berkeley CA 94709  
 Cedar Campus (Nursery-K): 2138 Cedar Street, Berkeley CA 94709  
 Hillegass Campus (K-Grades): 2515 Hillegass Ave, Berkeley CA 94704

**Office Use Only:** Application fee check received on \_\_\_\_\_ [Check #: \_\_\_\_\_ for \$ \_\_\_\_\_]

If you require physical assistance or a translation to fill out this form, please contact Berkeley Rose.

Child's Full Name:			
Gender:	Male	Female	Date of Birth:
			Place of Birth:
Application Date:		Date of Open House/Tour Attended:	
Please indicate program enrollment:			
<input type="checkbox"/>	<b>Rosebud Nursery</b> W - F 8:30 - 12:30 (age 2 by Mar.1, 2018) \$11,580 3 days only		
<input type="checkbox"/>	<b>Nursery Programs</b> M - F 8:30 - 12:30 (age 3 by Sep.1, 2018)		
CHECK ONE: <input type="checkbox"/> 3 days \$11,820 <input type="checkbox"/> 4 days \$12,900 <input type="checkbox"/> 5 days \$13,740			
<input type="checkbox"/>	<b>Kindergarten</b> M - F 8:30 - 1:00pm (age 5 by Dec. 1, 2018) \$14,580		

Please  
enclose a  
photo  
(any size) of  
your child  
and check for  
the non-  
refundable  
application  
fee of \$75).

PARENT'S NAME & RELATION:	PARENT'S NAME & RELATION:
ADDRESS:	ADDRESS:
HOME PHONE:	HOME PHONE:
WORK PHONE:	WORK PHONE:
CELL PHONE:	CELL PHONE:
EMAIL:	EMAIL:
EMPLOYER:	EMPLOYER:
OCCUPATION:	OCCUPATION:

## **YOUR RELATIONSHIP TO BERKELEY ROSE & WALDORF**

Why are you interested in having your child experience Waldorf education?

How did you learn about Berkeley Rose School?

Are you acquainted with anyone currently at a Waldorf school?

Are you planning to continue your child's education through the Grades at Berkeley Rose? Why or why not?

**There are no right or wrong answers** to the following questions, and your answers will not be judged. Rather, this questionnaire is meant to provide a more complete picture of your child and her/his life, helping the teacher prepare for the interview with you and your child. The purpose of the interview is to assess the appropriate program placement of your child, and to help the family understand Waldorf education and the child's experience at Berkeley Rose School. If you wish to skip a question, please write "skip" beside it. For non-applicable questions, write "N/A." Please feel free to continue answers on the back of the last page or to include your own additional page. Please sign and date the last page of this form, and include your child's photo and a check for \$75 (or \$125 for two or more children).

### **1. YOUR CHILD'S ACTIVITIES, INTERESTS, CHARACTER TRAITS**

1a. Please describe what activities your child enjoys, including any scheduled activities your child has outside of school, or particular interests.

1b. How would you characterize your child's strengths and challenges?

### **2. PLAY**

2a. Please describe your child's play experiences: themes, activities, characteristics.

2b. Please describe your child's relationship with siblings and friendships with other children (please include their ages).

2c. Does your child have imaginary playmates? Please describe them.

### **3. HOME LIFE**

3a. Please describe parents' relationship. If parents are separated or divorced, please describe the co-parenting relationship. Describe child's living situation, past and present.

3b. If you are a legal guardian, please describe your relationship and the circumstances of your guardianship.

3c. Please describe your family's relationship to spiritual or religious life, if applicable.

3d. Please describe your approach to discipline. How has your child responded to your discipline?

3e. What time does your child wake up? \_\_\_\_\_  
What time does your child go to bed? \_\_\_\_\_  
Does your child regularly wake in the night?

3f. What languages are spoken at home?

3g. What does your child typically eat?

Breakfast:

Lunch:

Dinner:

Snack:

Is your child a fussy eater \_\_\_\_, moderate eater \_\_\_\_, or hearty eater \_\_\_\_?

3h. How many hours per day does your child spend with electronic media, including television, videos/DVDs, cinema, radio, recorded music and stories, video games, handheld devices (such as LeapPads and iPads), smartphones, and computers? (Please indicate the average hours of viewing/listening/usage and content. Include differences between weekdays and weekends, if relevant.)

#### **4. CHILD'S HISTORY**

4a. Was your child adopted? If yes, at what age? Please describe the circumstances and your child's adjustment process.

4b. Are your child's biological father and/or mother active in your child's life? Please describe.

4c. How was the pregnancy? How was the birth?

Weight at birth \_\_\_\_\_ Size at birth \_\_\_\_\_ Was your child breastfed? \_\_\_\_\_ Until what age? \_\_\_\_\_  
At what age did your child: Crawl \_\_\_\_\_ Walk \_\_\_\_\_ Speak \_\_\_\_\_  
Start addressing her/himself as "I" \_\_\_\_\_  
When was your child toilet-trained? \_\_\_\_\_

#### **5. CHILD'S HEALTH HISTORY**

5a. Please describe your child's present health (well most of the year, tends to get sick often, etc.).

5b. Does your child have any physical characteristics, health conditions or allergies that might require special attention? If so, please describe them.

5c. Has your child had any serious illnesses, injuries, accidents, or surgery? If so, give date and describe briefly.

5d. Present medication, if any?

5e. Does your family have a particular dietary preference? Does your child have any food allergies?

5f. Does your child have any strong likes or dislikes (food, clothing, noises, etc.)? Please describe.

5g. Is there anything unusual in your child's motor or brain development?

5h. Does your child wet the bed?

5i. Does your child suck a thumb or fingers, bite nails, suck or twist hair, etc.? If yes, please describe behavior and when it started.

5j. Does your child have any unusual behaviors that the teachers should be aware of? Please describe.

**ACADEMIC HISTORY**

Most Recent School Name: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

School phone number or teacher contact number: \_\_\_\_\_

I give permission to Berkeley Rose School to speak with my child's previous teacher.

Signed: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Date: \_\_\_\_\_

1. Please list all previous school(s) attended:

Please use this space or attach another page to share with us any other thoughts or information about your child or family. You may also use this space to ask questions about policies and practices at Berkeley Rose School (a copy of Berkeley Rose School's Parent Handbook, which may answer some or all of your questions, can be found on our website).

### **Enrollment Procedure**

1. Attend a tour or an open house.
2. Upon submission of an application and payment of the \$75 application fee (\$125 for two or more children), parents will be contacted for an interview. Applications and application fees are due in the school office by January 19, 2018. Applications received after this date will be considered if space is available.
3. Decision letters for new kindergarten students will be sent on March 16, 2018. Decision letters for nursery applicants will be sent within two weeks of interview date.
4. Upon acceptance by the school, a completed Tuition Contract, a non-refundable, one-time Enrollment Fee of \$195 and payment of a Tuition Deposit (see below) for each student will be due. Contract, deposit and new-student registration fee must be received by the school office by March 23, 2018.
5. The enrollment process is complete upon 1) Payment of Registration Fee 2) Payment of Tuition Deposit and 3) Submission of the completed and signed Tuition Contract and all enrollment forms, and 4) Confirmation of enrollment in FACTS Tuition Management.

### **Tuition Deposit**

A non-refundable deposit of one month's tuition (1/12 of the annual tuition) for each student is required to secure a space in the class. This deposit will be applied toward the last month's tuition and fees payment for the academic year once the contract is completed, but is otherwise non-refundable.

### **Obligations of Enrolled Families**

Parents should be in agreement with and supportive of the school's philosophy and should be willing to attend the parent/teacher conferences, parent evenings, class meetings, and some of the adult education offerings in order to deepen their understanding of Waldorf education.

Parents must be willing to support the teachers' work as well as a healthy integration between home and school life by being attentive to the following areas at home: a regular and rhythmic schedule, adequate sleep and nutrition, and limited exposure to electronic media.

In addition, the school depends upon the families who are enrolled to volunteer their collective talents to maintain and enhance the health and stability of the school. Each family is expected to commit to 10 hours of volunteer work during the academic year.

**Dress Policy:** Berkeley Rose has a dress policy. Please be sure to read the policy and view all required early childhood program forms on the website.

**6-Week Trial Period:** Berkeley Rose Waldorf School reserves the first 6 weeks to ensure that the school, class, and teacher are an appropriate program for a new student. It is Berkeley Rose's goal to work with each family and student to create a healthy fit for our programs and will do this with everyone's (school, student, teacher) best interest in mind.

**Media Policy:** Exposure to TV and other electronic media (regardless of content) inhibits a child's innate capacity to form her/his own "inner pictures," an ability that is crucial for creative thinking and problem-solving. In addition, limiting exposure to electronic media has been shown to improve the mood of open-minded concentration and social stability in the classroom. Berkeley Rose School therefore encourages families enrolled in the school to eliminate the use of electronic media in the home.

**No-Drug Zone:** Alcohol and drugs are strictly prohibited at pick-up/drop-off and school community events. Alcohol may be available at some school events where children are not present.

Thank you for considering our school! Please sign to acknowledge understanding of the information above, and to verify that the information you provided in this form is accurate, to the best of your knowledge.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Berkeley Rose seeks to provide an environment of fiscal diversity, and is able to do so through tax-deductible donations in any amount, small or large.

I am able to contribute tax-deductible monies toward the Financial Aid fund in addition to our full tuition obligation.

To apply for the Tuition Assistance Program, please download the application from the website and submit your application by the deadline to ensure consideration. Please note that financial aid is not guaranteed, regardless of need.



Berkeley Rose seeks a representative community of diversity, welcoming students of any race, religion, ethnicity, or financial background. It does not discriminate on the basis of race, color, nationality, or ethnic origin in its programs or administration of its policies. The school is a tax-exempt 501(c)(3). Lic#013420958