**Sibling Information**

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Name</th>
<th>Last Name</th>
<th>Date of Birth</th>
<th>School</th>
<th>Grade</th>
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**Relatives who have attended Gulf Stream School**

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<tr>
<th>Name</th>
<th>Relationship</th>
<th>Dates of Attendance</th>
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**Additional Information**

Why are you considering sending your child to Gulf Stream School?  
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________

What qualities are you looking for in the school you want for your child?  
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________

Please comment on your child’s current school experience and setting; reasons for either skipping or repeating a grade.  
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________

Is your child bilingual?  ❑ No  ❑ Yes  If yes, what language besides English does he or she speak?  
________________________________________________________________________________________________________________________________

Has a behavioral or psychological evaluation been completed?  ❑ No  ❑ Yes  If yes, when?  
________________________________________________________________________________________________________________________________

By whom?  Is the report available?  
________________________________________________________________________________________________________________________________
Additional Information

Describe any illness, diseases, or physical disabilities which either have affected or may affect the candidate’s general health, school work, or participation in the physical education/athletic program:
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________

Please describe any specific talents, interests, or achievements either inside or outside of school: __________________________________________________________
_________________________________________________________________________________________________________________________________
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Has the candidate had any special tutoring, counseling, or speech therapy? __________________________________________________________
_________________________________________________________________________________________________________________________________
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How did you learn about Gulf Stream School? ___________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________

Have you previously applied to Gulf Stream School?  ❑ No  ❑ Yes  If yes, when?________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________

Notes of Importance

1. A non-refundable application fee of $100.00 must accompany this application. Checks should be made payable to Gulf Stream School.
2. A copy of the applicant’s birth certificate must accompany this application.
3. While it is not required, enclosure of a photograph of the applicant would be appreciated.
4. Final acceptance depends upon a personal interview, admission testing, WISC IV (Wechsler Intelligence Scale for Children) for applicants to Grades Two through Eight, previous work as shown by a transcript and teacher recommendations from the school last attended and the availability of openings. Applicants are considered for admission without regard to gender, race, religion or national and ethnic origin.
5. Please indicate if you will be applying for financial aid.  ❑ No  ❑ Yes
6. If applying for financial aid, the appropriate forms will be supplied by the School and must be completed by January 8th.

Signature(s) of Parent(s) / Guardian(s)  Date
_______________________________________________________________________________________________________  _________________________
_______________________________________________________________________________________________________  _________________________