

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Person(s) who will be responsible for payment of tuition and fees.

Do you intend to apply for flexible tuition? YES ☐ NO ☐ _____ TELEPHONE/WORK

With this application I am enclosing the \$150.00 non-refundable application fee. Make checks payable to Rolling Hills Preparatory School.

Please sign and return this form to: DIRECTOR OF ADMISSION in the envelope provided.

Rolling Hills Preparatory School admits students of any race, religion, or gender to all the rights, privileges, programs, and activities generally according to or made available to students at the school. It does not discriminate on the basis of race, religion, sex or national and ethnic origin in administration of its educational policies, scholarship and loan programs, or athletic and school administration programs.



TO BE COMPLETED BY PARENT OR GUARDIAN

TODAY'S DATE

IS THIS A REAPPLICATION? IF SO, WHEN DID THE APPLICANT FIRST APPLY?

DATE _____

Open House	<input type="checkbox"/>
Visit	<input type="checkbox"/>
Application	<input type="checkbox"/>
ISEE	<input type="checkbox"/>
Transcript	<input type="checkbox"/>
English Recommendation	<input type="checkbox"/>
Math Recommendation	<input type="checkbox"/>
Interview	<input type="checkbox"/>
	<input type="checkbox"/>

The photograph is requested,
not required.

F A M I L Y I N F O R M A T I O N

FATHER'S NAME		HOME ADDRESS AND TELEPHONE (IF DIFFERENT FROM APPLICANT'S)	
OCCUPATION / TITLE		SPECIALTY	
NAME OF ORGANIZATION / FIRM	BUSINESS ADDRESS AND TELEPHONE	CITY	ZIP
EDUCATION	COLLEGE/UNIVERSITY	DEGREE	
MOTHER'S NAME		HOME ADDRESS AND TELEPHONE (IF DIFFERENT FROM APPLICANT'S)	
OCCUPATION / TITLE		SPECIALTY	
NAME OF ORGANIZATION / FIRM	BUSINESS ADDRESS AND TELEPHONE	CITY	ZIP
EDUCATION	COLLEGE/UNIVERSITY	DEGREE	
E-MAIL ADDRESS	<input type="checkbox"/> MOTHER	<input type="checkbox"/> FATHER	<input type="checkbox"/> HOME
Check if appropriate			
<input type="checkbox"/> PARENTS DIVORCED	<input type="checkbox"/> PARENTS SEPARATED	<input type="checkbox"/> FATHER REMARRIED	<input type="checkbox"/> MOTHER REMARRIED
<input type="checkbox"/> FATHER DECEASED	<input type="checkbox"/> MOTHER DECEASED		

If ANY BOXES ABOVE ARE CHECKED, GIVE FULL NAME AND RELATIONSHIP OF THE CANDIDATE'S LEGAL GUARDIAN(S).

NAME	RELATIONSHIP	NAME	RELATIONSHIP
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Siblings

NAME	AGE	SCHOOL
NAME	AGE	SCHOOL
NAME	AGE	SCHOOL

Please note any current or former RHPS students and teachers that you are related to or know as friends.

NAME	RELATIONSHIP	CLASS/YEAR
NAME	RELATIONSHIP	CLASS/YEAR

A P P L I C A N T I N F O R M A T I O N

Applicant's current school:

SCHOOL NAME
ADDRESS
CITY
STATE
ZIP
TELEPHONE

Applicant's school references (teachers who have been asked to submit letters of reference):

NAME	SCHOOL	TELEPHONE
NAME	SCHOOL	TELEPHONE

Schools previously attended:

SCHOOL NAME	GRADE ATTENDED	CITY/STATE	TELEPHONE

Has the applicant ever skipped or repeated a grade? If so, please indicate the grade or grades and the circumstances.

Describe any unusual talents or achievements the applicant has shown either in or outside of school.

Has the applicant had any experience in the fine arts, such as music, art, drama, or writing? If so, please describe.

Describe any special circumstances which have affected the applicant's performance in school. (For example, illness or physical handicaps, particular learning difficulties, or frequent changes of homes or schools).

Has the applicant received any educational or emotional counseling? Please explain.

Briefly describe any regular responsibilities or routine duties for which the applicant is accountable in your household.
