

The Cambridge School

4611 SOUTH ELLIS AVENUE
CHICAGO, ILLINOIS 60653
WWW.CAMBRIDGECHICAGO.COM

ADMISSIONS CHECKLIST

Application Paperwork

The following must be received by The Cambridge School offices in order for the applicant to be considered in the admissions process.

Application for Admission	<input type="checkbox"/>
Parental Responsibilities Statement	<input type="checkbox"/>
Agreement with Statement of Faith	<input type="checkbox"/>
Teacher and/or Principal Questionnaires	<input type="checkbox"/>
\$125 Application Fee (check or money order)	<input type="checkbox"/>
Birth Certificate (copy)	<input type="checkbox"/>
Recent Photo of Applicant (no larger than 3" x 5")	<input type="checkbox"/>

Application Process

Upon submission of the Application, The Cambridge School personnel will schedule an interview with applicant's parents or guardians for testing of applicant. Campus tours and classroom visits also may be scheduled for applicants and their families if desired.

You may submit this electronic application **per each student applying** via E-mail using the following instructions:

1. Download application from Web site to your personal computer.
2. Open the file using Microsoft Word.
3. Complete the information by using the tab key to move the cursor forward and CTRL-Tab to reverse.
4. Once you have completed the form, select "File/Save As" from the Microsoft Word menu.
5. Save the file as "[Your child's full name] Cambridge E-Application."
6. Send the file as an attachment to admissions@cambridgechicago.com.
7. You will receive an E-mail confirmation upon receipt.
8. **You will still need to send the teacher questionnaires (directly from previous school), recent photo, copy of birth certificate, and application fee before your application can be considered.**

This file may also be printed and sent to:

The Cambridge School
Admissions Office
4611 South Ellis Ave.
Chicago, Illinois 60653

The Cambridge School admits students of any race, color, national and ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship programs, and other school-administered programs.

APPLICATION FOR ADMISSION



For Office Use Only		Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date received:	Check#:	Amt:
Testing:	Interview:	Financial Aid Award:

This application must be filled out completely and returned with a **NON-REFUNDABLE \$125.00** application fee.

To which location are you seeking enrollment? Chicago (North Kenwood) South Suburban (Country Club Hills)

Grade: _____ Year: _____ Do you intend to apply for financial assistance? Yes No

Student's Information

Last:		First:		Middle:
Date of birth:	Age:	Sex:	City of birth:	
Race: <input type="checkbox"/> African American <input type="checkbox"/> European/White American <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian American/Pacific Islander <input type="checkbox"/> Latino/Hispanic American <input type="checkbox"/> Multi-Racial/Bi-Racial American <input type="checkbox"/> Other:				
Is the student living with at least one parent? If no, list with whom the student is living (grandparent, uncle)				<input type="checkbox"/> Yes <input type="checkbox"/> No
Guardian Name:		Relationship:		
What is the marital relationship in the home: <input type="checkbox"/> Married and living together <input type="checkbox"/> Not married <input type="checkbox"/> One parent deceased <input type="checkbox"/> Not Married and living together <input type="checkbox"/> Living with natural parent and stepparent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Divorced/separated				
If parents are divorced or separated, who has legal custody of the student?				
Name:		Relationship:		

Father/Guardian

Name:		E-mail:	
Address:		City, State, Zip:	
Home phone:	Work phone:	Cell phone:	
Company name:		Occupation:	

Mother/Guardian

Name:		E-mail:	
Address:		City, State, Zip:	
Home phone:	Work phone:	Cell phone:	
Company name:		Occupation:	

Other Children

Name:	Age:	School:
Name:	Age:	School:
Name:	Age:	School:
Name:	Age:	School:

Name of person responsible for tuition, if other than parents.

Name:	E-mail:
Address:	City, State, Zip:

Relatives who attend or have attended The Cambridge School

Name(s):

Schools previously attended by student

School:	Dates attended:	Grades completed:
School address:		Phone:
School:	Dates attended:	Grades completed:
School address:		Phone:
School:	Dates attended:	Grades completed:
School address:		Phone:

From whom should we expect questionnaires (two teachers and/or one teacher and one principal)?

Name:	Position:	Phone:
Name:	Position:	Phone:

Student History

Has the student ever been suspended, asked to withdraw from school or expelled? If you answered yes to any part of this question, please provide complete details on a separate sheet of paper, including the principal's name and address of the school.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the student ever been retained in a grade? If yes, state grade year and circumstances on a separate sheet of paper and attach.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the student ever been recommended for Special Education testing, tested for placement in a Special Education program or placed in a Special Education program? If yes, please provide details of circumstances on a separate sheet of paper and attach.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the student ever had an Individual Educational Plan (IEP) written?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Describe your reasons for your child's application for admission to The Cambridge School, including why you're interested in a transfer if they are/were in a previous school. In addition, we welcome any special information you might share with us about your child.	

Family Information

If your family is involved in a local church, what church do you attend?	Name:
Denomination:	Address:
<p>The Cambridge School strives to maintain a socio-economically and racially inclusive school environment. In order to insure this balance, please answer the following questions. All information will be held in strict confidence and will be used only in the interest of maintaining balance in our school.</p> <p>Annual Income Level: <input type="checkbox"/> \$0 to \$25,999 <input type="checkbox"/> \$26,000 to \$39,999 <input type="checkbox"/> \$40,000 to \$65,999 <input type="checkbox"/> \$66,000 to \$99,999 <input type="checkbox"/> \$100,000+</p> <p>Number of persons living in household: _____</p>	

The Cambridge School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school-administered programs.

I am legally responsible for the child enrolling and I authorize this application for submission.

Signature of parent(s) or legal guardian (Check here for E-application; signatures required later) _____
Date

The Cambridge School

Parental Responsibilities Statement

Responsibility for Education: Parents are responsible for the education of their children. Parents may choose to delegate some aspects of their children's education to schools, coaches or tutors, yet the ultimate responsibility always rests with parents. At The Cambridge School we are mindful that we do not function above parental authority but rather with delegated authority from parents. We will make every effort to accommodate parents' requests and to consider their input in the development of our programs and the individualization of those programs for their children. We ask, however, that parents be mindful of the fact that as a school we are educating a group of children. There are limits to accommodations that can be made. If at any time a parent feels that the accommodations we are able to make are inadequate for their child's needs it is the responsibility of the parent to seek an educational alternative.

Volunteer Work: Parents or guardians are expected to volunteer at least two hours per month in some particular area of service to the school. One month out of each semester that volunteer service must actually be on the school campus during class times. Service opportunities will be publicized each month and parents may choose among these or propose an alternative service consistent with their gifts and abilities. A volunteer coordinator will track, document, and facilitate volunteer efforts and assignments.

I (we), _____, the parent(s)/guardian(s) of _____, agree and promise to fulfill my responsibilities as a parent of a Cambridge School student. I understand that it is imperative that I remain involved with my child's education at home and at school. I fully intend to complete the volunteer hours, to attend quarterly conferences with my child's teacher, and support the work of The Cambridge School to the best of my ability.

Checking here validates your agreement: Parent/Guardian

Checking here validates your agreement: Parent/Guardian

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I believe in one God,
the Father Almighty,
Creator of heaven and earth,
and of all things visible and invisible.

And in one Lord Jesus Christ,
the only-begotten Son of God,
begotten of his Father before all worlds,
God of God, Light of Light,
true God of true God,
begotten not made,
being of one substance with the Father,
by whom all things were made:
Who for us men and for our Salvation,
came down from heaven,
and was incarnate
by the Holy Spirit of the Virgin Mary,
and was made man;
and was crucified also for us under Pontius Pilate.
He suffered and was buried;
and the third day he rose again
according to the Scriptures,
and ascended into heaven,
and sits on the right hand of the Father.
And he shall come again with glory to judge the living and the dead:
Whose kingdom shall have no end.

I believe in the Holy Spirit, the Lord and giver of life,
who proceeds from the Father and the Son,
who with the Father and the Son together is worshipped and glorified,
who spoke by the prophets.

And I believe in one holy universal and apostolic church.
I acknowledge one baptism for the forgiveness of sins.
And I look for the resurrection of the dead
and the life of the world to come.

Amen

Although parents or guardians of The Cambridge School students are not required to confess belief in the doctrines expressed in this historic statement of faith, we do ask that all parents or guardians sign below indicating their understanding that the curriculum and instruction at The Cambridge School has as its foundation the Christian faith as expressed in this Christian creed.

It is my understanding that the curriculum and instruction at The Cambridge School has as its foundation the historic Christian faith as expressed in this Creed, and I do not object to my child being instructed in a manner consistent with a belief in the truth of this Creed.

Parent/Guardian Acknowledgement of Acceptance: "I/we do not object." Date: _____



The Cambridge School

4611 South Ellis Avenue
Chicago, Illinois
773-924-1200

Email: admissions@cambridgechicago.com

TEACHER QUESTIONNAIRE

(Kindergarten and 1st Grade Applicants)

Parents:

Please complete the top portion of this form and give to your child's current teacher. Ask that it be completed and returned directly to The Cambridge School Admissions Office.

Parents:

NAME OF APPLICANT: _____ APPLYING FOR GRADE: _____

My son/daughter is applying for admission to The Cambridge School. Please complete this form and return it directly to the Admissions Office at Cambridge. I authorize the release of my child's records and evaluative data to The Cambridge School and hold you harmless for any information provided.

Signature of Parent/Guardian: _____ Date: _____

Current Teachers:

The Cambridge School appreciates an honest assessment of the above named student. All information will be kept confidential, will not be shared, nor will it become a part of the applicant's permanent record.

Teacher: _____ Subject: _____ Grade: _____

School: _____ Teacher Signature: _____

Telephone: _____ Date: _____

SOCIAL/EMOTIONAL	Excellent	Good	Average	Needs Improvement	No Application
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separates easily from parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to correction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude towards peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude of peers toward student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude towards authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to obey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to communicate clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SCHOOL PERFORMANCE	Excellent	Good	Average	Needs Improvement	No Application
Small motor coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Large motor coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conversational skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neatness/Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number recognition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counting skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Art	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Music	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dramatic play	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment on the following:

How would you describe this child's temperament?

Parental support and involvement:

Has outside help been recommended? Yes No Been given? Yes No

Please elaborate:

Applicant's social and emotional development compared with others:

Describe student's response to direction and/or correction:

Special needs:

Strengths:

Weaknesses:

Please include additional comments:



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TEACHER QUESTIONNAIRE

(Applicants for Grades 2-6)

Parents:

Please complete the top portion of this form and give to your child's current teacher. Ask that it be completed and returned directly to The Cambridge School Admissions Office.

Parents:

NAME OF APPLICANT: _____ APPLYING FOR GRADE: _____

My son/daughter is applying for admission to The Cambridge School. Please complete this form and return it directly to the Admissions Office at Cambridge. I authorize the release of my child's records and evaluative data to The Cambridge School and hold you harmless for any information provided.

Signature of Parent/Guardian: _____ Date: _____

Current Teachers:

The Cambridge School appreciates an honest assessment of the above named student. All information will be kept confidential, will not be shared, nor will it become a part of the applicant's permanent record.

Teacher: _____ Subject: _____ Grade: _____

School: _____ Teacher Signature: _____

Telephone: _____ Date: _____

SOCIAL/EMOTIONAL	Excellent	Good	Average	Needs Improvement	No Application
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to obey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to correction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude towards peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude of peers toward student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude towards authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SCHOOL PERFORMANCE	Excellent	Good	Average	Needs Improvement	No Application
Reading skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grammar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vocabulary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Art	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Music	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drama	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment on the following:

How would you describe this student?

Parental support and involvement:

Has outside help been recommended? Yes No Been given? Yes No
Please elaborate:

Applicant's social and emotional development compared with others:

Describe student's response to direction and/or correction:

Special needs:

Strengths:

Weaknesses:

Please include additional comments:



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TRANSCRIPT RELEASE
AUTHORIZATION
&
QUESTIONNAIRE:
PRINCIPAL/HEADMASTER OR
GUIDANCE COUNSELOR

Parents:

My child is an applicant for admission to The Cambridge School. I hereby authorize you to release any of the following applicable records to The Cambridge School: a copy of the complete transcript, current report card, and any standardized test results. Please send all information directly to the Admissions Office.

Name of Applicant:

_____ *first* _____ *middle* _____ *last*

Date: _____ Applying to Grade: _____ Current Grade Level: _____

Name of Current School: _____

School Phone: _____
_____ *signature of parent*

Administrators:

The Cambridge School appreciates an honest assessment of the above named student. All information will be kept confidential, will not be released, nor will it become a part of the applicant's permanent record.

1. In what capacity and for how long have you known this applicant?
2. Please comment on the applicant's attitude toward school:
3. Has the applicant ever been suspended Yes No, or expelled Yes No? If yes, please explain:
4. To your knowledge, does the student have any history of conduct or behavior problems? Yes No If yes, please explain:
5. Does the applicant have a history of any learning disabilities? Yes No Does he/she require special assistance to meet academic requirements?
6. Additional comments, if needed:

Name of Principal/Headmaster or Guidance Counselor: _____

Signature: _____ Date: _____

Please return all information to the Admissions Office at The Cambridge School.