



NEW HORIZON SCHOOL WESTSIDE

Preschool Kindergarten Elementary
1819 Sawtelle Blvd. Los Angeles, CA, 90025 Tel: 310.231.6092 Fax: 310.231.6096
www.newhorizonwestside.org

Recent
Photograph
of Student

Application for Admission

To be completed by Parent or Guardian

Application to enter ____ grade in September of _____.

Applicant's Name _____
Last First Middle Nickname (if any)

Date of Birth _____ Birthplace _____ Male Female
Month / Day / Year

Applicant's Address _____
Number Street City State Postal Code

Home Phone _____ Fax _____

Current School _____ Current Grade _____ Principal's Name _____

School Address _____
Number Street City State Postal Code

School Phone _____ Type of School: Private Public Religious Other _____

Dates of attendance and reasons for leaving _____

How did you hear about us? School Website Friend Relative Other _____
Name of Person Who Referred You

Father/Guardian _____
Title First Last

Mother/Guardian _____
Title First Last

Address _____
(if different from applicant's)

Address _____
(if different from applicant's)

Home Phone _____

Home Phone _____

Cell Phone _____

Cell Phone _____

E-mail _____

E-mail _____

Employer _____

Employer _____

Occupation _____

Occupation _____

Work Phone _____

Work Phone _____

Marital Status: Married Separated Divorced Widowed Father Remarried Mother Remarried

Mother Deceased Father Deceased Unusual Accident or Serious Illness

Student Resides With: Both Parents Mother Father Other _____

If divorced, what are the custody arrangements? _____

Name/Address of person(s) financially responsible for contract: _____

If you are applying for financial assistance please check here:

Check all that apply: Repeated Grade Skipped Grade Attend Suspended/Expelled Special Education

Please list applicant's brothers and sisters below:

Name	Age	Present School
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Languages spoken at home _____

Religious Affiliation _____ Ethnic Background _____

What are your expectations for your child's education at this school? _____

What do you expect from the school in terms of discipline? _____

What do you feel are the responsibilities of the school? _____

Are you interested in being an involved parent? If so, how would you like to contribute? _____

Preschool Applicants Only: I am applying for Full Time Part Time MWF Part Time TTh

Application Statement

I hereby make this application for admission to enroll my son/daughter in New Horizon School Westside under the terms and conditions listed below:

- I understand, accept and support the academic standards, methods of discipline, rules of behavior, and dress code of New Horizon School Westside.
- I understand that the school reserves the right to dismiss any student from the school for improper conduct, failure to maintain acceptable academic progress, or for non-payment of tuition.
- I understand that the signing of this application gives permission for the above named student to take part in all school activities, including sports and trips away from the school premises, and absolves the school from liability for any injury incurred by the student at the school or during a school activity.
- I have read the above terms of this application.

Parent Signature _____

Date _____

Return completed application and application fee of \$150 to: New Horizon School Westside/ Admission Office
1819 Sawtelle Blvd., Los Angeles, CA 90025

For office use only:

Form of Payment: Cash Credit Card Check # _____ Received By: _____ Date: _____