

**THE IMAGO SCHOOL**  
1 PERCIVAL STREET  
MAYNARD, MA 01754  
978-897-0549

## APPLICATION FOR ADMISSION

### PARENTAL INFORMATION:

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Church Affiliation, if any: \_\_\_\_\_  
\_\_\_\_\_

Other Children in family, with ages: \_\_\_\_\_  
\_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Church Affiliation, if any: \_\_\_\_\_  
\_\_\_\_\_

Why do you wish to enroll your child/children in *The Imago School*?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who, if anyone, referred your family to The Imago School? \_\_\_\_\_

In making this application, we understand and certify that:

1. We (I) have read and understand the philosophy of the School as expressed in Imago's Statement of Faith and Handbook. We (I) substantially uphold its major tenets, specifically the School's academic and school life policies regarding homework, dress code, corporal punishment and spiritual instruction.
2. We (I) will attend all Parent-Teacher conferences and all-school functions, including Orientation meeting at the beginning of the school year.

Father's signature: \_\_\_\_\_

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

Mother's signature: \_\_\_\_\_

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

### OFFICIAL USE ONLY

- \_\_\_ Application fee
- \_\_\_ Acknowledgement Letter Sent
- \_\_\_ Health Record
- \_\_\_ Transcripts
- \_\_\_ Interview
- \_\_\_ Acceptance/Rejection Letter