



**THORNTON-DONOVAN SCHOOL
INDEPENDENT AND INTERNATIONAL**

**100 YEARS in 2001
DAY and RESIDENTIAL**

Accredited by Cognia-locally, regionally, nationally and internationally

Please fill out both sides of this form completely and accurately. Thornton-Donovan is committed to treating all applicants for admission in a fair and equitable manner. The School will not discriminate because of race, color, sex, religion, national origin or physical handicap as provided for in the federal and New York State laws. Thornton-Donovan School is approved by the U.S. Department of Justice and can provide I-20 forms to apply for non-immigrant student visas.

Please print clearly: Primary contact with parents will be via email and/or cellphone.

Date

Candidate's name in full Date of Birth

Residence Zip Code

Primary family email: 2nd email

Parent's Name Social Security No. Cell.....

Parent's Residence Zip Code Home Phone.....

Parent's Place of Business and Position

Parent's Business Address Bus. Ph. No.

Parent's Name Social Security No. Cell.....

Parent's Residence Zip Code Home Phone.....

Parent's Place of Business and Position

Parent's Business Address Bus. Ph. No.

Legal Guardian's Name (if other than above)..... Cell

Residence (if different from Father and Mother) Zip Code

Guardian's Place of Business and Position Soc. Sec. No.

Business Address Bus. Ph. No.

Name and Address of Present School

..... Headmaster or Principal

ENTERING T-D: GRADE MONTH YEAR.....

Other schools attended within the past two years and their addresses:

.....
.....

Two character references for the applicant address and phone number:

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Name and office address of family physician

.....Zip Phone No.

List any additional information which the School should have affecting this applicant's full participation in the academic and athletic program, including any emotional or medical conditions:

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Please indicate any family conditions (death, divorce, etc.) which the School should be aware of:

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Who referred you to Thornton-Donovan? Name and address:

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Has any member of the family attended or graduated from Thornton-Donovan? Please list name and relationship:

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Are you a U.S. citizen? Yes No If "no," what country? What type of VISA do you hold?

Country of birth? Languages other than English spoken at home

Give names and ages of other children in the family and the school they are now attending:

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.....

I hereby make application for admission of my (son, daughter) as a student at Thornton-

Donovan School for the period beginning20

If the above named student is enrolled, I will be responsible for all tuition, fees and other charges incurred by the candidate. I also request that textbooks be ordered through my school district where possible.

Signature of Parent or Legal Guardian

This application must be accompanied by a non-refundable application fee of \$100