

Beaches Episcopal School ◆ The Bolles School Whitehurst and Ponte Vedra Beach Campuses Episcopal School of Jacksonville ◆ Grace Episcopal Day School ◆ Greenwood School Jacksonville Country Day School ◆ Christ's Church Academy ◆ Martin J. Gottlieb Day School Providence School ◆ Riverside Presbyterian Day School ◆ St. Johns Country Day School St. Mark's Episcopal Day School ◆ San Jose Episcopal Day School ◆ The Discovery School

Parent/Guardian Questionnaire

Lower School

Name of Applicant	. Date of birth _	
Applicant's preferred name	☐ Male	☐ Female
Applying for Grade PRE-K K I I I 2 I 3 I 4 I 5 I 6 Applying for school	ol year	
Child lives with Both parents Mother Tather Other (please note)		
The schools listed above are all accredited by the Florida Council of Independent Schools and have cout by the applicant's parent(s) or guardian(s). We ask that you please complete the form and return it the appropriate school(s).		
If the applicant has applied to more than one of the schools listed above you may duplicate this questionnaire and submit copies.	ove,	
SHARING THE FOLLOWING INFORMATION WILL HE GET TO KNOW AND UNDERSTAND YOUR CHILI		
Please list your child's interests:		
Please describe your child's likes:		
ricase describe year crima's intest		
Please describe your child's fears/dislikes:		
r rease describe your crima's rears/distinces.		
Please tell us about your child's temperament and strengths:		

In what areas would you like to see growth and maturation?	
Briefly describe your child's previous school experiences.	
Please note any significant information prior, during or following your child's birth the into his/her development.	
Does your child have any siblings? If so, please list their names and ages.	
Is there anything you would like us to know about your child that we have not asked	d?
Signature(s) of person(s) completing form:	
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