



ADMISSIONS

THE APPLICATION PROCESS

An application is complete when the admissions office has received the following:

- An application form completed by the parents and signed by the parent and the student
- School records, IEP if applicable, and transcripts
- Results of a Wechsler Intelligence testing (WISC IV or WISC V) that includes subtest scores and is no more than three years old (preferably WISC V including naming speed and symbol translation index scales)
- Any other professional evaluations relevant to the student's learning difficulties (psychological evaluation, educational evaluation, audiological evaluation, etc.) that have been previously completed
- The \$100 application fee
- Current photo
- Teacher recommendation form

Families are invited to schedule a visit to the school. Visits are scheduled directly with the Director of Admissions.

Once the application is complete the school will schedule on-campus diagnostic testing. This testing will be followed by a feedback appointment with school personnel. At the feedback we will discuss the results of the testing and the Admissions Committee's determination of the appropriateness of the school's program for the student. If determined school is appropriate, a visit will be scheduled for the student.

ADMISSIONS CALENDAR

The school will begin to accept applications for the coming school year as early as a year prior to the intended enrollment date. Testing can begin when all necessary materials have been received.

Spaces will be offered to students on a rolling basis. In cases where there are more appropriate candidates for the grade than we have space available, students will be placed on a waiting list. It is possible that some grades will be completely filled by applicants from this first group. For this reason we urge families who would like to consider The New Community School as an option for their child to apply early and arrange for all necessary records to be sent in a timely manner.

Since significant aspects of the school's schedule for the coming year will already be determined by late spring, spaces will be offered to those candidates best able to fit into the existing schedule. Based upon previous experience we will have some openings available after April, but not necessarily at every grade level. We will continue to consider applicants for available space throughout the summer.



Attach current photo



APPLICATION

Application Date _____

Applying for the 20____ to 20____ School Year for ____ Grade

APPLICANT'S INFORMATION

_____ FIRST	_____ MIDDLE	_____ LAST	_____ PREFERRED NAME
_____ STREET ADDRESS		_____ CITY ST ZIP	
_____ HOME PHONE	_____ STUDENT CELL PHONE	<input type="radio"/> M <input type="radio"/> F	_____ PRESENT AGE
_____ PLACE OF BIRTH (City/State)	_____ DATE OF BIRTH	_____ CITY/COUNTY OF RESIDENCE	
_____ ETHNICITY <i>optional</i>	_____ RELIGION <i>optional</i>		

PARENT/GUARDIAN'S INFORMATION

_____ FIRST	_____ MIDDLE	_____ LAST	_____ PREFERRED NAME
_____ STREET ADDRESS <i>if different than applicant</i>		_____ CITY ST ZIP	
_____ HOME PHONE	_____ CELL PHONE	_____ WORK PHONE	
_____ EMAIL		_____ OCCUPATION	
_____ COMPANY		_____ TITLE	

PARENT/GUARDIAN'S INFORMATION

_____ FIRST	_____ MIDDLE	_____ LAST	_____ PREFERRED NAME
_____ STREET ADDRESS <i>if different than applicant</i>		_____ CITY ST ZIP	
_____ HOME PHONE	_____ CELL PHONE	_____ WORK PHONE	
_____ EMAIL		_____ OCCUPATION	
_____ COMPANY		_____ TITLE	

Y N Are both parents living? _____
 _____ WHO IS LEGAL GUARDIAN? _____ WITH WHOM DOES APPLICANT LIVE?

Y N Are parents divorced/separated? _____
 _____ WHO IS RESPONSIBLE FOR FINANCES? _____ WHO IS RESPONSIBLE FOR PERMISSIONS?



APPLICATION

BROTHERS & SISTERS + OTHERS LIVING AT HOME

_____	_____	_____
NAME	AGE	SCHOOL
_____	_____	_____
NAME	AGE	SCHOOL
_____	_____	_____
NAME	AGE	SCHOOL
_____	_____	_____
NAME	AGE	SCHOOL

OTHERS LIVING AT HOME

SCHOOL(S) ATTENDED FOR THE LAST FIVE YEARS

_____	_____
GRADE	SCHOOL
_____	_____
GRADE	SCHOOL
_____	_____
GRADE	SCHOOL
_____	_____
GRADE	SCHOOL
_____	_____
GRADE	SCHOOL

Please describe briefly the applicant's strengths:

Please describe briefly the applicant's learning areas of greatest academic need:

Please list any diagnosis the applicant has received (dyslexia, dysgraphia, ADHD, etc.):

Please list any other physical or emotional issues your child may have:

Please list any medications the student takes regularly:

How did you find out about TNCS?

Please use enclosed checklist to make sure all items are turned in.



APPLICATION

List teachers, therapists, physicians, psychologists, or psychiatrists who are familiar with the applicant's learning problem. If the student is currently in counseling please list the counselor first.

NAME

PHONE

ADDRESS

NAME

PHONE

ADDRESS

NAME

PHONE

ADDRESS

NAME

PHONE

ADDRESS

By submitting a signed copy of this application to The New Community School, the undersigned parents or legal guardians for the applicant authorize designated persons from The New Community School to contact any of the persons listed above regarding the appropriateness of placement of the applicant into The New Community School. Final determination of appropriateness of placement at The New Community School will be made by the Admissions Committee.

The application form does not constitute an enrollment agreement. The acceptance and enrollment of a student for one academic year does not constitute or imply an agreement to offer re-enrollment for the following year.

An application fee of \$100 to cover the expense of testing and processing must be submitted with this application. A report on the testing done by The New Community School will be made to the parents and student in conference. The school will not be able to provide a written report of testing prior to a student's attendance at the school.

APPLICANT'S SIGNATURE

PARENT OR GUARDIAN'S SIGNATURE

PARENT OR GUARDIAN'S SIGNATURE

Return this application to:

Director of Admissions
The New Community School
4211 Hermitage Road
Richmond, VA 23227

The New Community School does not discriminate on the basis of race, ethnic origin, or religious beliefs in its admissions process or its educational programs. TNCS offers financial aid to make its program available to students who otherwise could not attend.



RECORD RELEASE

professional

DATE

TO:

To whom it may concern:

You are hereby authorized to release to The New Community School the educational, psychological (including the subtest scores on all intelligence tests), and other supporting records of:

STUDENT'S NAME

I would appreciate your forwarding these to the following address as soon as possible.

Director of Admissions
The New Community School
4211 Hermitage Road
Richmond, VA 23227

Very truly yours,

PARENT OR GUARDIAN NAME

PARENT OR GUARDIAN SIGNATURE



RECORD RELEASE

school

STUDENT'S NAME

Parent or Guardian:

Please complete, sign, and present this form to your child's school. Do not send directly to The New Community School.

I consent to the release of my child's records to The New Community School. This release gives the school permission to share verbal and written information relevant to the admissions process with The New Community School.

PARENT OR GUARDIAN'S NAME

PARENT OR GUARDIAN'S SIGNATURE

DATE

School:

The above named student is applying to The New Community School. Please submit all middle school or high school records including the following information to the address below as soon as possible:

- Standardized test results
- Official transcript and list of courses taken (if of high school age)
- Transfer records
- Disciplinary record
- Individual Education Plan - education and supporting records

Director of Admissions
The New Community School
4211 Hermitage Road
Richmond, VA 23227
admissions@tncs.org
fax to 804.266.4664



TEACHER RECOMMENDATION

Teacher:

Your candid assessment of this student will have a bearing on our admission decision. Your insights will remain confidential. Thank you for your thoughtful consideration and comments.

APPLICATION TO _____

FOR GRADE _____ 20____/20____
FOR SCHOOL YEAR _____

STUDENT'S NAME _____

CURRENT GRADE _____

WHAT IS YOUR RELATIONSHIP WITH THE STUDENT (e.g. ENGLISH TEACHER) _____

HOW LONG HAVE YOU KNOWN HIM/HER _____

NUMBER OF STUDENTS IN THE GRADE/CLASS _____

Y N Does your school place students into sections according to ability?

IF YES, WHAT IS THE NAME/LEVEL OF THE COURSE AND TEXT BOOK THAT THE STUDENT IS CURRENTLY ENROLLED? _____

What are the first words that come to mind to best describe this student?

Personal Evaluation

	OUTSTANDING	GOOD	AVERAGE	BELOW AVERAGE	POOR	N/A
Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conduct	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern/Respect for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationships with Peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationships with Adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maturity of Judgement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibility/Dependability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to Lead Constructively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sense of Humor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment on any below average - poor ratings:

Y N Are you aware of any honor/disciplinary issues involving this student?

Y N Have any specific learning problems been noted?

Academic Evaluation

	OUTSTANDING	GOOD	AVERAGE	BELOW AVERAGE	POOR	N/A
Academic Potential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic Achievement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Intellectual Curiosity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Originality/Creativity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reasoning Ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral Expression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reading Comprehension	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Written Expression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quantitative Skills (math teacher)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	TOP 25%	TOP 50%	BOTTOM 50%	BOTTOM 25%	N/A	
Rank in Your Class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Please comment on any below average - poor ratings:

Work Habits

	OUTSTANDING	GOOD	AVERAGE	BELOW AVERAGE	POOR	N/A
Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Organization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work Ethic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Study Habits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attentiveness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to Work Independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to Submit Work on Time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please comment on any below average - poor ratings:

	OUTSTANDING	GOOD	AVERAGE	BELOW AVERAGE	POOR	N/A
Parent/Guardian Cooperation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional comments (e.g. special strengths/talents):

I Recommend this Student: ENTHUSIASTICALLY STRONGLY NEUTRALLY WITH RESERVATION NOT AT ALL

I have additional information I would like to discuss. Please call me at the number below.

(_____) _____ - _____
NUMBER

BEST TIME TO CONTACT

NAME

TITLE

SCHOOL

ADDRESS

SIGNATURE

DATE / /



CHECKLIST

- Send educational assessment (WISC IV or WISC V) to admissions office (mail, email, or fax)
- Campus visit with Director of Admissions
- Complete application & include a current photo of applicant
- Deliver completed application with photo, application fee, and all required forms to the admissions office.
Application fee for diagnostic testing: \$100
- Request an official transcript from the applicant's current school to be sent to New Community
- Teacher recommendation form

Questions? Contact Carolyn Tisdale, Director of Admissions
804.266.2494 x2218
admissions@tncs.org