

HOW TO APPLY

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INSTRUCTIONS *to the Applicant*

1.

Carefully fill out application Form A (do not forget to select your courses.) Next, ask your parents or guardians to sign the back of the form and mail it to the Summer School office, or fax the form to 860-945-7859.

Enclose a \$50 application fee payable to *Taft Summer School*, or ask your parents or guardians to provide a credit card number and expiration date.

2.

Give Forms B, C and D to the appropriate educator. Provide a stamped and addressed envelope with each form and ask your school to mail the completed forms to the Summer School office, along with a copy of your transcript.

Note: If you applied to the Taft School for the 2012–2013 academic year, you need not send the additional transcripts and recommendations to the Summer School. Simply fill out Form A and indicate in the appropriate space that you have applied. We will obtain your records from the Admissions office.

APPLICATION A

TAFT SUMMER SCHOOL: June 24–July 28, 2012

THE TAFT SCHOOL, WATERTOWN, CONNECTICUT 06795

Applicant _____
FIRST NAME MIDDLE NAME LAST NAME

Home address _____
STREET CITY STATE ZIP COUNTRY

Date of birth _____ Male Female Present grade _____ Email _____

Country of citizenship _____ Country of birth _____

Do you have a U.S. Green card? Yes No Have you applied to Taft for the 2012–13 school year? Yes No

PROGRAM TO WHICH YOU ARE APPLYING:

- Day Boarding
 Young Scholars (for students entering grades 7, 8 and 9—applicant must be 12 years of age by June 1, 2012)
 Liberal Studies (for students entering grades 10, 11 and 12)

FATHER'S NAME _____

Address _____
(IF DIFFERENT THAN ABOVE) STREET CITY STATE ZIP COUNTRY

Home phone _____ Business phone _____ Cell phone _____

Fax _____ E-mail _____

MOTHER'S NAME _____

Address _____
(IF DIFFERENT THAN ABOVE) STREET CITY STATE ZIP COUNTRY

Home phone _____ Business phone _____ Cell phone _____

Fax _____ E-mail _____

PRESENT SCHOOL _____

School address _____
STREET CITY STATE ZIP COUNTRY

School phone _____ School Fax _____

Guidance Counselor, Principal, or Head of School _____

School you will attend next fall _____
(IF DIFFERENT FROM ABOVE) School phone _____

HOW DID YOU HEAR ABOUT THE SUMMER SCHOOL?

- Friend Family member Guidance Counselor/Teacher Taft Admissions Office Taft Website

Educational Consultant _____ Publication _____ Other _____
(PLEASE SPECIFY)

Name of any relatives who have attended The Taft School or The Taft Summer School _____

APPLICATION A

YOUNG SCHOLARS PROGRAM (FOR STUDENTS ENTERING GRADES 7, 8 AND 9):

It is recommended that students enrolled in this program take the courses described on page 10 in this catalog. Each student must take two 100-level (major) courses and two 200-level (elective) courses. Students who wish to take courses other than those recommended should list their choices in order of preference. Because of the possibility of a course being filled, please list three choices.

Math course student will be enrolled in next fall: _____

100-Level Courses

1. _____

2. _____

3. _____

200-Level Courses

1. _____

2. _____

3. _____

LIBERAL STUDIES PROGRAM (FOR STUDENTS ENTERING GRADES 10, 11 AND 12):

Each student must take two 100-level (*major*) courses and two 200-level (*elective*) courses. Because of the possibility of a course being filled, please list three choices in order of preference.

Math course student will be enrolled in next fall: _____

100-Level Courses

1. _____

2. _____

3. _____

200-Level Courses

1. _____

2. _____

3. _____

WOULD YOU LIKE COPIES OF YOUR GRADES AND REPORTS SENT TO ANYONE OTHER THAN YOUR PARENTS? IF SO, WRITE IN NAME AND ADDRESS BELOW.

Name _____

School address _____
STREET CITY STATE ZIP COUNTRY

IF TUITION IS PAID BY SOMEONE OTHER THAN YOUR PARENTS OR GUARDIAN, WRITE IN NAME AND ADDRESS BELOW.

Name _____

Address _____
STREET CITY STATE ZIP COUNTRY

SIGNATURE OF PARENT OR GUARDIAN _____

DATE _____

MAIL YOUR COMPLETED APPLICATION WITH A NONREFUNDABLE \$50 APPLICATION FEE TO:

Summer School Admissions
The Taft School
110 Woodbury Road
Watertown, Connecticut 06795

The Taft School actively seeks and admits students of any race to all its rights, privileges, programs and activities and does not discriminate on the basis of race, color, creed, sex, sexual orientation, or national origin in the administration of its policies and programs.

TEACHERS REPORT 1 C

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PLEASE RATE STUDENT BY CHECKING THE APPROPRIATE BOXES BELOW:

	Excellent	Good	Fair	Poor
1. Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Peer interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Response to constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Overall evaluation as a student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In what subject do you teach the applicant? _____

How long have you known the applicant? _____

Teacher's Name _____

Position _____

School Name _____

Phone _____ Email _____

School address _____
STREET CITY STATE ZIP COUNTRY

Teacher's Signature _____

Applications are reviewed as they are received; therefore, we request your prompt attention to this recommendation. We cannot decide on the student's application until all forms have been received; late applications could jeopardize a student's chances for admission. Thank you for your help in evaluating this student.

RETURN RECOMMENDATION TO:

Summer School Admissions
The Taft School
110 Woodbury Road
Watertown, Connecticut 06795

TEACHERS REPORT 2 D

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32

PLEASE RATE STUDENT BY CHECKING THE APPROPRIATE BOXES BELOW:

	Excellent	Good	Fair	Poor
1. Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Peer interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Response to constructive criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Overall evaluation as a student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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