



Please attach a recent photo of applicant.

8141 College Parkway • Fort Myers, FL 33919 • (239) 481-4323 • Fax: (239) 481-8339 • www.canterburyfortmyers.org

Date \_\_\_\_\_ Applying For Grade \_\_\_\_\_ Beginning \_\_\_\_\_

Please complete this application and mail to the Director of Admission.

### APPLICATION INFORMATION

Applicant's Name \_\_\_\_\_  
(Last) (First) (Middle) (Preferred)

Home Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone \_\_\_\_\_  Male  Female Birth Date \_\_\_\_\_ Age \_\_\_\_\_  
(Month) (Day) (Year)

E-Mail \_\_\_\_\_

Place of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_ Social Security # \_\_\_\_\_

### FAMILY INFORMATION

**Father** Name (Dr./Mr.) \_\_\_\_\_ **Mother** Name (Dr./Mrs./Ms.) \_\_\_\_\_

Home Address \_\_\_\_\_ Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

E-Mail \_\_\_\_\_ E-Mail \_\_\_\_\_

Social Security No. \_\_\_\_\_ Social Security No. \_\_\_\_\_

Business Title \_\_\_\_\_ Business Title \_\_\_\_\_

Company Name \_\_\_\_\_ Company Name \_\_\_\_\_

Business Address \_\_\_\_\_ Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_

Are parents separated?  Yes  No Divorced?  Yes  No If yes, who has legal custody? \_\_\_\_\_

With whom does the student live? \_\_\_\_\_ Name of Step-parent (if any) \_\_\_\_\_

Who is financially responsible for the student? \_\_\_\_\_

## STUDENT APPLICATION

**FAMILY INFORMATION** (cont'd)

**Applicant's brothers and sisters:**

*Name*

*Age*

*School attending*

*Grade*

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**Relatives who are or have attended Canterbury School: (Give name, relationship and years attended)**

*Name*

*Relationship*

*Years attended*

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How did you hear about Canterbury? \_\_\_\_\_

What community involvement have you had, including service on boards of organizations? \_\_\_\_\_

What do you consider your child's greatest strengths? \_\_\_\_\_

What do you consider your child's greatest areas of need? \_\_\_\_\_

Please note any medical conditions of your child that the school should record. \_\_\_\_\_

If the student has received or is receiving counseling due to a serious personal problem or event, please share information about that help so we can better understand and respond to your child's needs.

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If the applicant has a disability and would like to request accommodations in the admission process, please explain here. Documents from a qualified professional must either be enclosed with this application or sent directly to the Admission Office.

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Will you be applying for need-based financial aid?  Yes  No

If so, please ask us for the Parent's Financial Statement which you will file with the School and Student Service for Financial Aid in Princeton, NJ. Paperwork should be filed with that office no later than February 15 of the year prior to entering Canterbury. All grants are need-based. Canterbury makes admission decisions and financial aid awards separately. Financial aid funds are limited and may not be available to all admitted students.

**CURRENT SCHOOL INFORMATION**

Applicant's present school \_\_\_\_\_ Present grade \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Name of Principal/Counselor \_\_\_\_\_

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Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

A nonrefundable application fee of \$75 must be submitted with each application. Make check payable to Canterbury School.