

# Application for Admission 2015-2016



## The Leelanau School

Attach a recent  
photograph  
of the  
applicant

(optional)

Applying for grade \_\_\_\_\_ in  September  January

Summer  Other

Attending as:  Day Student  7-day Boarding Student

5-day Boarding Student

*To be completed by the parent or guardian. Please type or print using black ink.*

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### APPLICANT INFORMATION

Applicant  
Name

\_\_\_\_\_  
First Middle Last Prefers to be called

Date of birth \_\_\_\_\_ Gender \_\_\_\_\_  
Month / Day / Year

Country of Citizenship \_\_\_\_\_ Nationality \_\_\_\_\_

Birthplace \_\_\_\_\_

Applicant's home address \_\_\_\_\_

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

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

Present School \_\_\_\_\_ School City/State \_\_\_\_\_

Present Grade \_\_\_\_\_

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### PARENT INFORMATION

(Please check all that apply)

Applicant lives with

Father  Mother  Stepfather  Stepmother  
 Guardian  Other

Please check any that apply:

father is deceased  mother is deceased  
 parents are divorced  parents are separated

Names and ages of other children \_\_\_\_\_

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**PARENT 1****PARENT 2**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

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

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

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

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

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Position \_\_\_\_\_

Position \_\_\_\_\_

Name of Business \_\_\_\_\_

Name of Business \_\_\_\_\_

Business Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Email address \_\_\_\_\_

Email address \_\_\_\_\_

Religious Affiliation (optional) \_\_\_\_\_

Will you be applying for Financial Aid?  Yes  NoHas your child taken the SSAT?  Yes  No Testing Date \_\_\_\_\_Have scores been sent to Leelanau?  Yes  No**International Students:**  
Have you taken the TOEFL?  Yes  No  
(our code is 4570)Have you taken the SLEP?  Yes  No

Other? \_\_\_\_\_

Have results been sent to Leelanau?  Yes  No\_\_\_\_\_  
Testing Date

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**MAILING INFORMATION**

Person financially responsible for applicant and to receive correspondence concerning applicant:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

If parents live apart, person to receive additional copy of correspondence concerning applicant, and relationship to applicant:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone: \_\_\_\_\_

Address \_\_\_\_\_

Please list the names of relatives or friends who have attended The Leelanau School.

Name \_\_\_\_\_ Class Year \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Class Year \_\_\_\_\_ Relationship \_\_\_\_\_

Is there any learning style need, medical or psychological history that might interfere with your child's ability to participate fully in the School's programs?

Yes

No

If yes, please explain.

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Has your child had any educational/psychological testing in the past five years; undergone any counseling or treatment in the past five years; ever been involved with the judicial system; or ever been suspended from school?

Yes

No

If yes, please explain.

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Note: Please be sure that the Admissions Office receives copies of all such reports and test results (psychological and/ or academic evaluations).

**Please feel free to attach any additional comments, photographs, note special awards, or personalize this application in any way!**

We, the undersigned, understand that any information furnished in support of this application shall be complete and confidential, and shall not be disclosed to anyone, including the candidate and his/her family, except that the Director of Admissions may, for official purpose at his/her discretion, disclose any part or all thereof to such person or persons as he/she deems advisable.

We further attest that all statements made herein, and on the Student's and Parental/Guardian Statements are true and complete, and understand that any false statements, or disclosures could result in the dismissal of the applicant, if enrolled.

**Signature of parent or guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

The Leelanau School wishes to include students without regard to religion, race, national and ethnic origin in its student body. The Leelanau School does not discriminate on the basis of religion, sex, race, color, national and ethnic origin in administration of its educational policies, scholarship and loan programs, and athletic or other School-administered programs.

# Application for Admission The Leelanau School

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## STUDENT'S PERSONAL STATEMENT

To the Applicant:

Your input to the admissions process is very important, and we would like to learn more about you, your interests, and your goals.

Please complete this form in your own words. If you need more space, feel free to attach additional sheets or paper or documents.

**Applicant Name:** \_\_\_\_\_

**1. What are your favorite school subjects and why?**

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**2. How would your friends describe you?**

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# Application for Admission The Leelanau School

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## PARENTAL/GUARDIAN STATEMENT

To the Parent(s)/Guardian(s):

This form is provided to gather information about your child, family, and expectations.

Please complete this statement and return it with the application. If you need more space, please attach additional sheets of paper or documents.

**Applicant Name:** \_\_\_\_\_

**1. Why are you interested in having your child change schools at this time:**

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**2. Why do you think Leelanau might be a good match for your child?**

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# English Recommendation Form

Applicant's Name: \_\_\_\_\_

To The Applicant: Please enter your name on the line above, and ask your current English teacher to complete this form, which evaluates your English ability and performance. Include a stamped envelope addressed to The Leelanau School Admissions Office.

To the English Teacher: The above named person is applying for admission to The Leelanau School, a nondenominational, college preparatory, coeducational boarding and day school for students in grade 9-12. Founded in 1929, its primary goal is to provide a place for young people to develop and realize their potentials: intellectual as well as emotional, social, moral, and physical. Leelanau's curriculum is designed for the college-bound student and is graded on a 4.0 scale.

To assist Leelanau in the admission selection process, we gather information on the applicant's academic potential and character. Student histories are compiled from personal and academic recommendations, applications, applicant and parent statements, school records, and academic evaluations. Your recommendation will assist us by providing information on the applicants's strengths and weaknesses in English. All information that you provide is confidential.

Thank you for completing this recommendation.

**Current English Course and Level** (please circle): AP, Honors, Remedial \_\_\_\_\_

Course topics covered: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please rate the applicant, in relation to college-bound peers, in the following areas:

Ability as a Student	Excellent	Good	Average	Fair	Poor
Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic English Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classroom Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# English Recommendation Form

Please continue to rate the applicant, in relation to college-bound peers, in the following areas:

Ability as an English Student	Excellent	Good	Average	Fair	Poor
Discussion/Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Mechanics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading Comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Character and Personality	Excellent	Good	Average	Fair	Poor
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity in Relation to Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In the space below (or on additional paper), please add any additional comments, especially those which may provide further insight into the applicant as an English student. Concrete examples are helpful, especially in noting any particular strengths or weaknesses.

Overall, I recommend this student for admission to The Leelanau School:

- Enthusiastically       With Reservations  
 Strongly                       Do Not Recommend  
 Fairly Strongly

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ PLEASE PRINT

Please call me  (            ) \_\_\_\_\_ Best time \_\_\_\_\_

School \_\_\_\_\_

Address \_\_\_\_\_

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

# Math Recommendation Form

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Applicant's Name: \_\_\_\_\_

To the Applicant: Please enter your name on the line above and ask your current Math teacher to complete this form which evaluates your Math ability and performance. Include a stamped envelope addressed to The Leelanau School Admissions Office.

To the Math Teacher: The above named student is applying for admission to The Leelanau School, a nondenominational, college preparatory, coeducational boarding and day school for students in grades 9-12. Founded in 1929, its primary goal is to provide a place for young people to develop and realize their potentials: intellectual as well as emotional, social, moral, and physical. Leelanau's curriculum is designed for the college-bound student and is graded on a

4.0 scale. At a minimum, students are required to successfully complete Algebra I, Geometry, and Algebra II.

To assist Leelanau in the admissions process, we gather information on the applicant's academic potential and character. Student histories are compiled from personal and academic recommendations, applications, applicant and parent statements, school records, and academic evaluations. Your Math recommendation will assist us by providing academic information about the applicant. All information you provide is confidential.

Thank you for completing this recommendation.

**Current Mathematics Course and Level** (please circle): AP, Honors, Remedial

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Course topics covered: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please rate the applicant, in relation to college-bound peers, in the following areas:

Ability as a Student	Excellent	Good	Average	Fair	Poor
Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic Math Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading Comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classroom Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Personal Recommendation Form

Applicant's Name: \_\_\_\_\_

To The Applicant: Please enter your name on the line above, and ask an adult who knows you well in a non-academic area to complete this form. Include a stamped envelope addressed to The Leelanau School Admissions Office.

To the Recommender: The above named person is applying for admission to The Leelanau School, a nondenominational, college preparatory, coeducational boarding and day school for students in grades 9-12. Founded in 1929, its primary goal is to provide a place for young people to develop and realize their potentials: intellectual as well as emotional, social, moral, and physical. Leelanau's curriculum is designed for

college-bound students and is graded on a 4.0 scale.

To assist Leelanau in the admission selection process, we gather information on the applicant's academic potential and character. Student histories are compiled from personal and academic recommendations, applications, applicant and parent statements, school records, and academic evaluations. Your Personal Recommendation will assist us by providing social information about the applicant. All information that you provide is confidential. Thank you for completing this recommendation.

1. How long have you known the applicant? **1.** \_\_\_\_\_  
\_\_\_\_\_
2. In what capacity have you known the applicant? **2.** \_\_\_\_\_  
\_\_\_\_\_

Please rate the applicant using this scale.

Character and Personality	Excellent	Good	Average	Fair	Poor
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity in Relation to Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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# Personal Recommendation Form

4. Please comment on the applicant's performance in extracurricular, community, and work activities. Have you noticed any special competence, talent, or capacity for leadership?

4.

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5. In what ways do you feel the applicant would contribute to The Leelanau School community?

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6. Are there any influences in the applicant's home life that might affect his or her school work or peer relationships?

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7. Please supply an anecdote about this applicant which shows character, compassion, skill, or humor, that would tell us more about the candidate. Feel free to attach extra paper.

7.

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Overall, I recommend this student for admission to The Leelanau School:

- Enthusiastically
- Strongly
- Fairly Strongly
- With Reservations
- Do Not Recommend

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ PLEASE PRINT

Please call me  ( \_\_\_\_\_ )

Best time \_\_\_\_\_

School \_\_\_\_\_

Address \_\_\_\_\_

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

# Permission to Release School Records

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## Directions

This form should be completed by the parent or guardian and submitted to the Registrar at the applicant's current school. The school should then make official copies of the student's records and send them to:

Admissions Office  
The Leelanau School  
One Old Homestead Road  
Glen Arbor, MI 49636

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Grade

\_\_\_\_\_  
School Name

I hereby grant permission for the above school to release official copies of these school records for the student named above. They should be mailed to The Leelanau School.

Please send copies of:

- Official Record  
(name, address, birthdate, grade level, class rank, and attendance record)
- Scores from Intelligence, Aptitude, and Achievement Tests
- Activities Record
- Family Background Information
- Comments or Observations from Teachers or Counselors
- Results from any psychological or academic evaluations

This release form will also remain valid for any future requests made by officials of The Leelanau School.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date