

# Hillside School Summer Term 2009

## Application Form

404 Robin Hill Road  
Marlborough, MA 01752

email: [jmatthews@hillsideschool.net](mailto:jmatthews@hillsideschool.net)  
phone: 508-303-5709

Full Legal Name \_\_\_\_\_ But prefers to be called \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_  
                  Month   Day    Year           As of 9/08

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

\_\_\_\_\_  
Street

\_\_\_\_\_  
Street

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

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

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

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

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

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Weekly Scheduling

Summer Term / Coeducational students ages 9 to 16

<u>Session 1</u>	Day	Boarding	<u>Session 2</u>	Day	Boarding
(July 13 – July 24)		(\$1,200)	(July 27 – Aug. 7)		(\$2,200)

### Summer Term Questionnaire

*Please take a moment to answer the questions below so that we may get to know you and your child better:*

1. What courses are you interested in your child taking for the summer program? (Please circle two)

Language Arts    Math    Computers    Farm    English as a Second Language

2. Why do you want your child to take these courses? (Please use the back of this form to explain).

3. Is there anything we need to know about your child to enhance his/her time at the Hillside Summer Term? (Please use the back of this form to explain).

4. Please indicate (below) if you would rather visit the campus with your child or have a Hillside representative briefly chat with your child by phone. Staff member John Matthews will call to confirm your decision, but please mark which one you would prefer:

\_\_\_ Please arrange a campus visit for my child and myself      \_\_\_ Please schedule a phone call with my child

5. What school is your child currently attending:

6. Please provide two people who can be used as a reference for your child:

- Name \_\_\_\_\_
- Relation to child \_\_\_\_\_
- Phone Number \_\_\_\_\_
  
- Name \_\_\_\_\_
- Relation to child \_\_\_\_\_
- Phone Number \_\_\_\_\_

*Thank you for completing this application form and for your interest in the Hillside School Summer Term 2008!*