

Blair Academy

Part I: Application for Admission



(Please Print or Type)

Present Grade _____ Applying for Grade 9 10 11 PG Applying for September 20____

Applying as: Boarding Student Boy Day Student Girl Has the applicant previously applied for admission to Blair Academy? Yes No

Last Name _____ First Name _____ Middle _____ Preferred Name _____

Home Street Address _____ Home Telephone _____

City _____ State _____ Zip Code _____

Date of Birth _____ Country of Birth _____ Citizen of _____

Preferred E-mail _____ Social Security Number _____

How would you describe yourself? Please check one. (optional)

- Asian American Black Hispanic Caucasian/White
 Pacific Islander African American Latino/Latina Indian Subcontinent
 Alaskan Native West Indian Asian Other _____
 Native American _____ Biracial/Multiracial _____
Please specify tribal affiliation *Please specify*

Present School _____ Public Private

School Street Address _____ School Telephone _____

City _____ State _____ Zip Code _____

How did you learn about Blair Academy? Blair Family Blair Alumnus/a Friend Your School
 Educational Consultant Blair Web site Admission Presentation Independent School Directory/Web site

Name of Referrer. How is this person connected to Blair Academy?

Names of relatives who are alumni or who now attend Blair Academy: _____ Class _____ Relationship _____

Names, ages, and schools attending/attended of all brothers and sisters (including half and step):

Parents (please check one)

- Married Single Separated Divorced Mother Deceased Father Deceased

Student lives with (check any that apply)

- Father Mother Stepfather Stepmother Guardian Other _____

Father's Full Name

Mother's Full Name

Home Street Address (if different from applicant)

Home Street Address (if different from applicant)

Home Telephone

Home Telephone

E-mail Address

E-mail Address

City State Zip Code

City State Zip Code

Company/Position

Company/Position

Business Street Address

Business Street Address

City State Zip Code

City State Zip Code

Office Telephone

Fax

Office Telephone

Fax

Testing to be submitted (check all that apply and include past or future date of testing)

- SSAT (Secondary School Admission Test) Date: _____ ISEE Date: _____
 PSAT Date: _____ SAT Date: _____ TOEFL Date: _____

Is the applicant applying for financial aid? No Yes (If yes, please complete Parts I and II of the application and return it to the Office of Admission by January 15 in order to begin the financial aid process.) All financial aid paperwork must be submitted by February 1.

Signature of Applicant

Date

Signature of Parent or Guardian

Date

Signature of Person Responsible for Tuition

Date

Please enclose application fee (\$50 for U.S. Citizens/\$125 for International Students) with this form and mail to:

Blair Academy, Office of Admission, Post Office Box 600, 2 Park Street, Blairstown, NJ 07825-0600

Note to Parents: Complete and return Parts I and II of the Application for Admission as soon as possible with the appropriate fee. For international applicants, the application must be completed online before an interview may be scheduled.

Notice of Nondiscriminatory Policy

Blair Academy does not discriminate on the basis of sex, age, creed, race, color or national and ethnic origin in the administration of its education policies, admission, scholarships, loans or other school-administered programs. Each Blair student is afforded the rights, privileges and social, academic and athletic opportunities that are generally accorded or made available to students of the school.

Part II: Student Questionnaire: *Personal*

This questionnaire is an essential portion of your application for admission to Blair Academy. Its purpose is to allow the Admission Committee to get to know you as well as possible and to learn more about your experiences and interests.

Name

Grade to Enter

1) Why have you decided to investigate Blair Academy, and what aspects have influenced your decision to apply?

2) What do you consider your greatest personal strength?

3) What personal characteristics would you like to further develop while at Blair Academy?

4) What are the most important qualities you look for in a friend?

5) Please list any extracurricular activities in which you have been involved during the past three years. Activities might include athletics, the arts, student government, community service, work experience, etc. Please list these activities **in an approximate order of importance to you**, and indicate the level of your involvement.

ACTIVITY & LEVEL IF APPLICABLE	POSITION/ROLE	YEARS OF EXPERIENCE	HOURS/ WEEK	DO YOU PLAN TO PURSUE AT BLAIR?

6) List any awards or honors you have received. Please be specific (Academic, Athletic, Community, etc.).

7) Which new extracurricular offerings do you wish to explore at Blair?

8) An opportunity for a bit of reflection and creativity: If you could share a meal with any prominent person (living, deceased or fictional), who would it be? Why?

Part II: Student Questionnaire: *Academic*

Name

Grade to Enter

1) Do you have any special course interests for next year? If so, please list them.

2) Which of your teachers has influenced you the most? Why have you chosen this person?

3) What is your favorite piece of literature? Please explain why.

Request for Official Transcript

To the Candidate:

Fill in the following information and *submit to your school registrar after the first marking period.*

Name

Grade to Enter

Street Address

City

State

Zip Code

Signature

Date

To School Registrar:

Please return with this completed form, no later than February 1, the official transcript, which must include grades from the current academic year, standardized testing scores and child study team evaluation on the above student to:

Blair Academy
Office of Admission
Post Office Box 600
2 Park Street
Blairstown, NJ 07825-0600

We would appreciate the inclusion of a profile of your school. Should you have any questions, please call our office at: (908) 362-2024 or (800) 462-5247.

Your assessment of the student's personal character will be valuable to the Office of Admission.

1) Please comment on any strengths, weaknesses or problems of which we should be aware.

Request for Official Transcript continues on reverse side

BLAIR ACADEMY

TELEPHONE (800) 462-5247 FAX (908) 362-7975 WEB SITE WWW.BLAIR.EDU

English Teacher Recommendation Form

Please return this form by February 1 to:

Office of Admission, Blair Academy, Post Office Box 600, Blairstown, NJ 07825-0600

To the current classroom teacher of *ENGLISH* of: _____
Applicant's Name—Please Print or Type

The applicant is a candidate for admission to Blair Academy. Your professional assessment of this student's progress in English will be valuable to the Admission Committee and to the Dean of Academics in planning the student's program at Blair. We would appreciate your supplying the information requested below.

Academic

1) Briefly describe the nature of the course. For example, indicate what literature was read, how much writing was accomplished, and the general level of achievement of the class.

2) What specific weaknesses did the student have? What areas need more attention: writing, reading, vocabulary, grammar, speech, etc.? Please explain.

3) What specific strengths did the student display? What material caught his/her interest the most?

4) List the main texts that were used and indicate how much of each text was completed (or will be completed) in your course.

Form continues on reverse side

BLAIR ACADEMY

TELEPHONE (800) 462-5247 FAX (908) 362-7975 WEB SITE WWW.BLAIR.EDU

Social

5) Is the candidate courteous and mannerly in social relations?

6) Is the candidate reliable and/or dependable?

7) Describe the candidate's personality.

8) In relation to others of the same age you have known, please summarize your rating of this candidate.

	Outstanding	Excellent	Good	Fair	Poor
As a person:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a student:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Comments:

Teacher's Name

School

Date

Teacher's Signature

Telephone

E-mail

Mathematics Teacher Recommendation Form

Please return this form by February 1 to:

Office of Admission, Blair Academy, Post Office Box 600, Blairstown, NJ 07825-0600

To the current classroom teacher of MATHEMATICS of: _____
Applicant's Name—Please Print or Type

The applicant is a candidate for admission to Blair Academy. Your professional assessment of this student's progress in mathematics will be valuable to the Admission Committee and to the Dean of Academics in planning the student's program at Blair. We would appreciate your supplying the information requested below.

Academic

1) Please give the name of the course in which the student is currently enrolled.

2) Sections are sometimes designated in ways to indicate the course's degree of advancement. What, if any, such designation pertains to the applicant's section?

3) Please list the texts used in your course. Indicate by pages or chapters and sections the material to be completed by the end of this year. Your indications of the depth of coverage will be helpful as will be any information about any major departure from the work of the text.

4) In what areas or with what kinds of problems is the applicant proficient? (Please give examples.)

5) In what areas or with what kinds of problems is the applicant encountering the greatest difficulty?

Form continues on reverse side

BLAIR ACADEMY

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6) We require all students to complete a three-year sequence of Algebra I, Geometry and Algebra II. For strong mathematics students, a complete course in Trigonometry is included in an Algebra II Honors course. Advanced courses and electives are available to students who have satisfactorily completed the required sequence. Our advanced courses include a variety of offerings in Pre-Calculus, Non-AP Calculus, AP Calculus (AB) and AP Calculus (BC). A course in Math Review is offered to those students interested in Math but not sufficiently prepared for Pre-Calculus. In your judgment, where should the applicant be placed in this program?

Social

7) Is the candidate courteous and mannerly in social relations?

8) Is the candidate reliable and/or dependable?

9) Describe the candidate's personality.

10) In relation to others of the same age you have known, please summarize your rating of this candidate.

	Outstanding	Excellent	Good	Fair	Poor
As a person:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
As a student:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Additional Comments:

Teacher's Name

School

Date

Teacher's Signature

Telephone

E-mail

Thank you.
Office of Admission

Name of Evaluator

Telephone

Street Address

E-mail

City

State

Zip Code

Place of Employment

Position

Relationship to Candidate

Years of Relationship

Signature

Date

