



Student Name _____

REFERENCE INFORMATION

(please provide information about the people who will complete the questionnaires)

Parent/Sponsor _____
name relationship to applicant

phone number(s)/ email

Parent/Sponsor _____
name relationship to applicant

phone number(s)/ email

School Representative #1 _____
name relationship to applicant

phone number(s)/ email

School Representative #2 _____
name relationship to applicant

phone number(s)/ email



Watershed
SCHOOL

Student Name _____

FAMILY INFORMATION

The applicant's parents (circle one):

married divorced separated civil union single

The applicant lives with (circle those that apply):

both parents father mother guardian

(guardian's relationship to applicant _____)

Father's Name _____ Date of Birth _____

 first middle last month/day/year

Address _____

 street address apartment city state zip

Home Telephone (_____) _____ Cell (_____) _____

Work (_____) _____ Email _____

Employer _____ Occupation/Title _____

Mother's Name _____ Date of Birth _____

 first middle last month/day/year

Address _____

 street address apartment city state zip

Home Telephone (_____) _____ Cell (_____) _____

Work (_____) _____ Email _____

Employer _____ Occupation/Title _____

Guardian's Name _____ Date of Birth _____

 first middle last month/day/year

Address _____

 street address apartment city state zip

Home Telephone (_____) _____ Cell (_____) _____

Work (_____) _____ Email _____

Employer _____ Occupation/Title _____



Student Name _____

Applicant's Siblings

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____



Student Name _____

Use the space below to tell us more about your favorite activity listed on the previous page.



AUTHORIZATION TO OBTAIN AND RELEASE STUDENT RECORDS

Name of Student _____

Please complete this form and return it to Watershed immediately. Parent or guardian, please sign the following page.

Schools Previously Attended (Most Recent First)

school name	grade(s)	dates attended
-------------	----------	----------------

address	phone number	fax number
---------	--------------	------------

reason for leaving

school name	grade(s)	dates attended
-------------	----------	----------------

address	phone number	fax number
---------	--------------	------------

reason for leaving

school name	grade(s)	dates attended
-------------	----------	----------------

address	phone number	fax number
---------	--------------	------------

reason for leaving



Name of Student _____

I hereby authorize the schools listed on the previous page to release transcripts of credit, test data, health records, counseling information, and any other records pertaining to the performance of the student to:

Admissions
Watershed School
1661 Alpine Ave.
Boulder, CO 80304

Signature of parent or guardian date

Signature of parent or guardian date



Name of Student _____

APPLICANT QUESTIONNAIRE PART I

To the Applicant: Please answer the following questions so that we can learn about you and why you want to be a student at Watershed School. Remember, there are no right or wrong answers -- we want you to answer these questions honestly so we can get to know you. Please use a separate sheet of paper to answer the questions (typed or handwritten) and sign the bottom of the document verifying that your answers are true. Each answer should be 1-2 paragraphs in length.

1. Write about two things you feel confident about and two things that are challenging for you at school.
2. What most excites you about Watershed School? What would you like to learn more about in school?
3. Describe one of your most memorable learning experiences.

We would like to know your impression of your abilities in the following areas. Please use the following number scale to accurately complete the assessment. Remember, there are no wrong answers. We want to know what you think, not what others think about you.

- (1) Excellent
- (2) Good
- (3) Average
- (4) Poor
- (5) Very Poor
- (6) I would like to improve this.

My academic achievement is _____
My creativity is _____
My motivation is _____
My self-discipline and work habits are _____
My communication skills are _____
My independence and initiative are _____
My self-confidence is _____
My maturity level is _____
My concern for others is _____
My leadership skills are _____
My personal qualities and character are _____
My overall evaluation is _____



Name of Student _____

APPLICANT QUESTIONNAIRE PART II

Read the following directions carefully. Please choose (2) of the following (4) topics for middle school or high school applicants and write 1-2 paragraphs in response. Use the space on the back of this sheet. Please write in your own handwriting.

If you are a middle school applicant:

Topic 1: Write about the hardest thing you have ever done.

Topic 2: What are you like as a friend?

Topic 3: What is your ideal way to spend a Saturday?

Topic 4: If you were an animal, what would you be and why?

If you are a high school applicant:

Topic 1: Write about the hardest thing you have ever done.

Topic 2: How has your sense of who you are changed over the last year?

Topic 3: Who is your hero (if possible, write about someone who is not famous)?

Topic 4: If you could design a project to address a problem that Boulder County faces, what would it be? How would it make a difference in your community?

For all applicants:

Watershed School is dedicated to the highest ethical and academic standards. We expect honesty, respect for persons and property, and honorable behavior. Our requirements are necessary to maintain a community filled with trust and affection, where people are supported and feel cared for, a community from which we can draw both strength and pride. Your signature below is considered verification of your intention to uphold, support, and enforce Watershed School's expectations of achievement and conduct. In addition, it attests to the fact that the answers in this application are uncompromisingly true.

Signature of student applicant

date



Name of Student _____

PARENT/SPONSOR QUESTIONNAIRE

To the Parent/Sponsor: Watershed School believes that parents/sponsors should be as involved as possible in the student's experience at the school. Please answer the following questions to assist us in the admissions process. Type or neatly print your answers on separate sheets of paper. Please keep each answer between one to three paragraphs in length.

Name _____

Relationship to Applicant _____

1. Tell us about the applicant's strengths, interests, and goals.
2. Tell us about the applicant's challenges and needs. Please include any information about academic support services received.
3. What academic experiences has your child had that have made a significant impact on their success at school (individualized attention, structures to support homework habits, regular check-ins with a teacher)?
4. Would you like him or her to attend Watershed School? What do you think he or she will gain from the experience?
5. Physical activities and outdoor experiences are essential to the Watershed curriculum. Is there anything in the applicant's medical history that our staff should know in order to more effectively help the candidate participate in the school's curriculum?
6. If the applicant has ever seen a school counselor, mental health specialist or psychiatrist, please share information about the nature of this counseling to help us better understand his or her needs.
7. As a parent, you will play an important part in the Watershed School community. What special skills or interests do you have that you can share with the school? (teaching a class, fundraising, community connections, etc...)



Name of Student _____

8. We would like to know your assessment of the applicant's abilities in the following areas. Please use the following number scale to accurately represent the applicant. We will use this information to learn more about the applicant so we can better serve his/her needs.

- (1) Excellent
- (2) Good
- (3) Average
- (4) Poor
- (5) Very Poor

His/her academic achievement is _____

His/her creativity is _____

His/her motivation is _____

His/her self-discipline and work habits are _____

His/her communication skills are _____

His/her independence and initiative are _____

His/her self-confidence is _____

His/her maturity level is _____

His/her concern for others is _____

His/her leadership skills are _____

His/her personal qualities and character are _____

Signature of parent or sponsor

date



Name of Student _____

SCHOOL REPRESENTATIVE QUESTIONNAIRE #1

To the Applicant: Please give this questionnaire to two representatives at your school, including your math teacher and someone who knows you well enough to assess your potential to succeed at Watershed School (e.g., teacher, guidance counselor). Please mail completed form to:

Admissions
Watershed School
1661 Alpine Ave.
Boulder, CO 80304

Name of School Representative _____

Phone _____ Email _____

School _____ Title _____

To the School Representative: This student is applying to Watershed School, an academically rigorous experiential college prep middle and high school. Please answer the following questions to assist us in the admissions process. When you are finished, please mail the questionnaire directly to Watershed School. Type or neatly print your answers on separate sheets of paper.

1. How long have you known the applicant and in what capacity?
2. Is the applicant's record with your school a true indicator of his or her ability, or have other circumstances interfered with his or her achievement? If so, what has interfered?
3. What are the applicant's academic strengths and challenges? What level of math and language arts is the student enrolled in? If possible, describe the math content of the student's current coursework.
4. What are the applicant's personal strengths and challenges? How does the applicant interact with peers? teachers? adults/persons of authority?
5. To the best of your knowledge, does the applicant have a history of inappropriate behavior? If so, please explain. Has the applicant been suspended or expelled from school?
6. To the best of your knowledge, does the applicant require academic support services?



Name of Student _____

7. What suggestions can you give us to help this applicant be successful at Watershed School?

We would like to know your assessment of the applicant's abilities in the following areas. Please use the following number system to appropriately represent the applicant.

- (1) Excellent
- (2) Good
- (3) Average
- (4) Poor
- (5) Very Poor

His/her academic achievement is _____

His/her creativity is _____

His/her motivation is _____

His/her self-discipline and work habits are _____

His/her communication skills are _____

His/her independence and initiative are _____

His/her self-confidence is _____

His/her maturity level is _____

His/her concern for others is _____

His/her leadership skills are _____

His/her personal qualities and character are _____

Signature of evaluator

date



Name of Student _____

SCHOOL REPRESENTATIVE QUESTIONNAIRE #2

To the Applicant: Please give this questionnaire to two representatives at your school, including your math teacher and someone who knows you well enough to assess your potential to succeed at Watershed School (e.g., teacher, guidance counselor). Please mail completed form to:

Admissions
Watershed School
1661 Alpine Ave.
Boulder, CO 80304

Name of School Representative _____

Phone _____ Email _____

School _____ Title _____

To the School Representative: This student is applying to Watershed School, an academically rigorous experiential college prep middle and high school. Please answer the following questions to assist us in the admissions process. When you are finished, please mail the questionnaire directly to Watershed School. Type or neatly print your answers on separate sheets of paper.

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4. What are the applicant's personal strengths and challenges? How does the applicant interact with peers? teachers? adults/persons of authority?
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His/her self-discipline and work habits are _____

His/her communication skills are _____

His/her independence and initiative are _____

His/her self-confidence is _____

His/her maturity level is _____

His/her concern for others is _____

His/her leadership skills are _____

His/her personal qualities and character are _____

Signature of evaluator

date



Name of Student _____

CONFIRMATION OF DISCLOSURE

By signing this, I/we agree that I/we have disclosed all documentation and record of the applicant's educational and academic records or any special educational services received (including but not limited to: Individual Education Plans (IEP), 504 Plan, and speech or occupational therapy records) as well as any discipline concerns or actions taken in a school setting. I also agree that I have disclosed all record of emotional and/or therapeutic services received which could in any way be pertinent to their experience in a school setting.

Printed name of parent/guardian

Signature of parent/guardian

date

Printed name of parent/guardian

Signature of parent/guardian

date