



# NEW DAY SCHOOL

## Neo-Humanist Education

1825 SE Clinton St. Portland, OR 97202 [www.newdayschool.org](http://www.newdayschool.org) [welcome@newdayschool.org](mailto:welcome@newdayschool.org) Ph:503-231-7425

**SCHOOL APPLICATION FORM** *Information in this form is important in establishing a relationship with your family. Please fill out all relevant fields and return to New Day School with a non-refundable \$25 application fee (cash/ check/ money order)*

Child's Name: \_\_\_\_\_

Phone # \_\_\_\_\_

Child's Birth date: \_\_\_\_\_

Desired start date \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

☐ Full time schedule(M-F)

☐ Preferred part-time schedule (please circle)  
M-F/MWF/ TRF/ MTR/ TR/WF/MW

Email (s) \_\_\_\_\_

☐ Flexible: any 2-3 days / week

Address \_\_\_\_\_

NDS does not offer a 4-day option and **cannot guarantee** to accommodate your 1st choice. Spots are offered based on availability, age, potty training, gender ratio, diversity, number on the wait-list, and, suitability of the family to the Neo-Humanistic approach of the program.

Has your child been to another preschool or child care center? If yes, please tell us the name of the center, how long was your child enrolled, and the reason for withdrawal. \_\_\_\_\_

---

---

---

---

Please tell us about your values and interests and why are you interested in joining the New Day community?

---

---

---

---

---

---

---

Please share your knowledge of Neo-humanist Education: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your expectations in sending your child to our school? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any allergies, food sensitivities or health concerns we should be aware of? \_\_\_\_\_  
Please give examples/details \_\_\_\_\_  
\_\_\_\_\_

Please list history of prior incidents & the severity \_\_\_\_\_  
\_\_\_\_\_

To strengthen enrollment outreach, please share how you were referred to us.

How did you find out about our school? Please check all that apply...

- ☐ I was referred by a friend. Name: \_\_\_\_\_
- ☐ I attended an open house. Date: \_\_\_\_\_
- ☐ I visited the website.
- ☐ I read /saw something online. Website name: \_\_\_\_\_
- ☐ I learned through social media (Facebook, email, etc.). Which one? \_\_\_\_\_
- ☐ Other. Please specify \_\_\_\_\_

*Return this form to New Day School with a non-refundable \$25 application fee (check, money order or cash please) payable to New Day School, 1825 SE Clinton Street Portland, OR 97202. Your child's name will be added to the waitlist upon the receipt of application fee.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

For office use only: Date received: \_\_\_\_\_ Check# \_\_\_\_\_