

Foundation Studies Program



At The Brooklyn Waldorf School

Applicant Information			
FIRST NAME	MIDDLE INIT	LAST NAME	DATE OF BIRTH
HOME ADDRESS		CITY	STATE ZIP
Email		Email	
GENDER		ETHNICITY (Optional)	
<input type="checkbox"/> Male	<input type="checkbox"/> Caucasian	<input type="checkbox"/> African-American	<input type="checkbox"/> Indian
<input type="checkbox"/> Female	<input type="checkbox"/> Latino/a	<input type="checkbox"/> Native American/Alas	<input type="checkbox"/> Asian-Pacific Islander
		<input type="checkbox"/> Other: Specify	

Program Schedule & Fees											
<table border="1"> <thead> <tr> <th>Calendar & Schedule</th> </tr> </thead> <tbody> <tr> <td>Year 1 From Sep 17, 2009 - June 17, 2010 9/26/09; 10/24/09; 11/14/09; 1/30/10; 1/31/10; 2/27/10; 3/20/10; 4/24/10; and</td> </tr> <tr> <td>Year 2 From Sep 2010 - June 2011</td> </tr> <tr> <td>Year 3 From Sep 2011 - June 2012</td> </tr> <tr> <td>Year 4 From Sep 2012 - June 2013</td> </tr> </tbody> </table>	Calendar & Schedule	Year 1 From Sep 17, 2009 - June 17, 2010 9/26/09; 10/24/09; 11/14/09; 1/30/10; 1/31/10; 2/27/10; 3/20/10; 4/24/10; and	Year 2 From Sep 2010 - June 2011	Year 3 From Sep 2011 - June 2012	Year 4 From Sep 2012 - June 2013	<table border="1"> <thead> <tr> <th>Application Fees*</th> </tr> </thead> <tbody> <tr> <td>Application fee*: \$ 50</td> </tr> <tr> <td>Yearly fee: \$ 2,500</td> </tr> <tr> <td>Materials fee: \$ 50</td> </tr> <tr> <td>Payments are due on Sep 1, Dec 1, and Feb 1</td> </tr> </tbody> </table>	Application Fees*	Application fee*: \$ 50	Yearly fee: \$ 2,500	Materials fee: \$ 50	Payments are due on Sep 1, Dec 1, and Feb 1
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<p>* Application fee is due with the submission of you application. Please make checks payable to the Brooklyn Waldorf School.</p>											
<p>Refund policy: The Brooklyn Waldorf School does not provide refunds two weeks after the starting of classes.</p>											

Emergency Contact Information			
NAME	RELATIONSH	HOME PHONE	CELL PHONE
General Physician Name		HOME PHONE	CELL PHONE
ALLERGIES & OTHER RELEVANT MEDICAL INFORMATION TO BE USED IN CASE OF AN EMERGENCY			

Applicant's signature		
Signature	PRINT NAME	Date
Brooklyn Waldorf School		
Signature	PRINT NAME	Date

Foundation Studies Program

Education Background

List each college and university starting with earliest enrollment

Name of High School	Location		Graduation date
Name of High School/College	Location	Degree	Graduation date

Current Occupation

Please answer the following questions:

Have you studied or worked with any aspect of Anthroposophy before?

How did you learn about this program?

Are you acquainted with the works of Rudolf Steiner? If so, please list what you have read.

Personal interests (skills, hobbies, musical instruments, languages, etc.)

On a separate page please write down:

Why do you wish to attend the Part-time Foundation Studies Program?

Please share a one-page long autobiography with us, including any information that you think may be helpful.

IMPORTANT: Your application should be accompanied by a non-refundable Application fee of \$50 payable to the Brooklyn Waldorf School. And a recent photo (optional).

NOTE: A telephone or personal interview is also required. The program directors will contact you to set up an appointment once we have received application.