



Please attach a recent photo of your child to the application.



Huakailani School Application for Admission

Check One: _____ 2009-2010 _____ 2010-2011 _____ 2011-2012

Applying for: Kindergarten First Second Third Fourth Fifth Sixth (Circle One)
Will you need care after school? (After 2:30 p.m.)? Yes No Until what time? _____

FAMILY INFORMATION

Child's Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Email: _____ Home Phone: _____

Mother's Name: _____ Father's Name: _____

If child does not live with both parents in one household, please answer the following:
Are parents separated? _____ divorced _____? Who is legal guardian? _____
Are there specific visitation days? _____

Other children in family (Name and Age), School Attended

CHILD'S EDUCATION

Previous school(s) provider(s) attended: _____

Name: _____	Name: _____
Address: _____	Address: _____
City/State: _____ Zip: _____	City/State: _____ Zip: _____
Phone: _____	Phone: _____
Dates attended: _____	Dates attended: _____

In order to plan the best educational program for your child, please respond to the following items:

Does your child have or do you believe your child to have a learning or other disability? Yes No

Has your child previously received special education or psychological services? Yes No

FAMILY BACKGROUND INFORMATION

Mother's Occupation: _____ Father's Occupation: _____
Employer: _____ Employer: _____
Employer's Address: _____ Employer's Address: _____
Phone: _____ Phone: _____

Child's Country of Birth: _____
Ethnicity (check all that apply): Hispanic Caucasian African -American Asian or Pacific Islander
American Indian Hawaiian Native Other _____

What are the languages spoken in the home? _____ Primary language? _____
Second language? _____

How did you hear about our school? _____

SIGNATURE

I certify that the information provided on this application is true and accurate. I understand and accept that failure on our part to disclose all relevant information during this process may result in my child being dismissed from the school.

Signature Date

Signature Date

Mail To:
Huakailani School
146 Hekili Street, Suite 104
Kailua, Hawaii 96734

~Submit with a \$35.00 Application Fee – Please make checks out to Huakailani School~

Policy of Non-Discrimination

Huakailani Learning Center does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational and admission policies, scholarships and loan programs, and athletic and other school administered programs.