

# Eagle Hill School

## SUMMER WORKSHOPS

45 Glenville Road, Greenwich CT 06831  
(203) 622-9240

*Please attach a recent  
photograph here.*

### APPLICATION FOR ADMISSION

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Full Name of Applicant \_\_\_\_\_ Nickname \_\_\_\_\_

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Address: Street, City, State, Zip code \_\_\_\_\_ Date of Birth \_\_\_\_\_

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|                     |                     |
|---------------------|---------------------|
| Father's Name _____ | Mother's Name _____ |
|---------------------|---------------------|

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|----------------------------|----------------------------|
| Home Address: Street _____ | Home Address: Street _____ |
|----------------------------|----------------------------|

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|  |  |
|--|--|
| City, State, Zip Code _____ Home Phone _____ | City, State, Zip Code _____ Home Phone _____ |
|--|--|

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|                           |                           |
|---------------------------|---------------------------|
| Occupation or Title _____ | Occupation or Title _____ |
|---------------------------|---------------------------|

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|                       |                       |
|-----------------------|-----------------------|
| Employer's Name _____ | Employer's Name _____ |
|-----------------------|-----------------------|

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|  |  |
|--|--|
| Nature of Business (e.g., law firm, retail firm) _____ | Nature of Business (e.g., law firm, retail firm) _____ |
|--|--|

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|                                  |                                  |
|----------------------------------|----------------------------------|
| Employer's Address: Street _____ | Employer's Address: Street _____ |
|----------------------------------|----------------------------------|

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|                             |                             |
|-----------------------------|-----------------------------|
| City, State, Zip Code _____ | City, State, Zip Code _____ |
|-----------------------------|-----------------------------|

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|                      |                      |
|----------------------|----------------------|
| Business Phone _____ | Business Phone _____ |
|----------------------|----------------------|

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|--------------------------|--------------------------|
| Parent's Education _____ | Parent's Education _____ |
|--------------------------|--------------------------|

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Child's present grade \_\_\_\_\_ Name of present school and contact person \_\_\_\_\_

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Ages of Siblings: Brothers \_\_\_\_\_ Sisters \_\_\_\_\_ Child's Special Interests \_\_\_\_\_

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Indicate any family conditions (death, divorce, adoption) which the school should be aware of:

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Who referred you to Eagle Hill-Greenwich? \_\_\_\_\_

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