



Dear Parents,

Thank you for your interest in Shining Mountain Waldorf School and your desire to learn about Waldorf education. Our Early Childhood program has two components:

Morning Kindergarten: a mixed-age group of three to six-year olds, with partial-week options for three and four-year olds. Applicants must be three years old by May 31st and be toilet-trained.

Rainbow Garden: an afternoon kindergarten for those who want an extended day for their child. You can contract for 2, 3, 4 or 5 days a week. It is not a drop-in program.

Please include the following when applying for the Early Childhood Program:

- Application for Enrollment—Early Childhood Program
- Early Childhood Program Parent Form
- Childcare Provider/Teacher Questionnaire
This may be faxed or mailed to Shining Mountain by the current teacher.
- A family photo which includes your child
- \$50 application fee
- Current test results (if applicable)

When I have received all of these, I will contact you, and your child will be invited to participate in a playgroup. I will also schedule a time for you to meet the Early Childhood teachers. The purpose of the playgroup and meeting is to provide an opportunity for both the family and teachers to get acquainted. This also helps to assure that Shining Mountain is a good fit for you and your child.

In addition, we ask that you attend one of our monthly tours which are offered October through May, usually on the third Thursday of the month, from 9:00-11:00 a.m. The tour will help you learn more about our well-rounded, age-appropriate curriculum for students from early childhood through grade 12. You are welcome to attend any of our many public events during the year. A card listing these events can be obtained by calling **303-444-7697**, or by going to the Admissions/Public Events page of our website.

For children attending five days a week, we offer tuition assistance which is based on need. You can get a TA application by calling our Lower School office at **303-444-7697**.

If you have any questions or desire more material on Waldorf education, please call me at **303-951-8579**. I look forward to talking with you about this important decision.

Sincerely,

Nita Davanzo
Director of Admissions
Shining Mountain Waldorf School
999 Violet Avenue
Boulder, Colorado 80304



To our prospective parents,

As you continue with the admissions process, we hope that you will become more informed about the educational values and environment that are found at Shining Mountain. The Waldorf experience is unique in many ways, and it can bring something special to both your life and the life of your child.

Waldorf schools educate out of the insight that the cultivation of the imagination—through arts such as storytelling, puppetry, singing, instrumental music, drama, painting, drawing, and eurythmy—is essential for the unfolding of clear thinking and sound judgment later in adolescence and adulthood. It also stresses the importance of imaginative play, rhythm in daily life, and the quality of the physical environment on a young child's development.

You might notice that some of our practices and principles run counter to mainstream life. This is especially true in the area of media activities, such as TV, video/computer games, movies, DVDs, radio and electronic musical instruments. We ask you to learn about why, and to work with the teachers to eliminate media in the kindergarten and early grade school years. If questions arise for you or you have reservations, please bring them to your interview or to the Admissions Office.

What follows are some of the ideals, values and practices that we ask you to consider:

- **Support the recommendation to protect children from exposure to media.** Recent brain research shows that brain development is adversely affected by TV and media exposure up to age 11. Media experiences sap a child's strength and creative energy, interfere with healthy social development, and weaken potential academic performance.
- **Create a rhythmical home life for your child,** including regular sleeping hours and mealtimes and a balanced diet. These support the learning process and the work of the kindergarten and grades teachers.
- **Attend parent evenings, parent education lectures, and school activities** held throughout the year. These are central to your child's success in school and provide a significant window into your child's education and the classroom community in which this takes place.

Shining Mountain Waldorf School is a kindergarten through twelfth grade program. By upholding the above ideals, from mother to father, family to family, and home to school, we believe we can achieve our long-term goal—to bring forth the unique possibilities of each child.

Sincerely,

Nita Davanzo
Director of Admissions
Shining Mountain Waldorf School
999 Violet Avenue
Boulder, Colorado 80304

Shining Mountain Waldorf School

999 Violet Avenue • Boulder, Colorado 80304 • (303) 444-7697 • Fax (303) 444-7701

www.smwaldorf.org

Application for Enrollment—Early Childhood Program

Applying for: 2 days _____ 3 days _____ 5 days _____
(5-year olds and 6-year olds may only apply for the 5-day option.)

Afternoon Program/Rainbow Garden: 2 days _____ 3 days _____ 4 days _____ 5 days _____
(If your child will be attending Rainbow Garden, please fill out a Rainbow Garden contract.**)

Child's Name _____ Birth Date _____

Gender _____ Start Date _____

Parent #1: Name _____

Address _____

PLEASE CIRCLE THE BEST PHONE NUMBER TO CALL . . .

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail Address _____

Employer _____

Occupation/special interests _____

Parent #2: Name _____

Address (if different from above) _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail Address _____

Employer _____

Occupation/special interests _____

If the child does not live with both parents, please describe the child's living situation: _____

Please list the name and birth date of other children in the family. Note those who are currently attending SMWS or who are applying.

Will you be applying for Tuition Assistance? (TA is offered for children who attend 5 days a week). Yes No

Who will hold financial responsibility? _____

**** Rainbow Garden is an afternoon kindergarten/preschool program provided for parents who wish an extended day for their children. It is not a "drop-in" program. It is first-come, first-served, so please sign up as soon as possible. There are spaces for 18 children each day; after those spaces are filled, there is a waiting list.**

What school is your child currently attending? _____

Has your child ever attended a Waldorf school? If so, which one and for how long? _____

Have you consulted any professionals to address medical, emotional, learning or behavioral challenges regarding your child?
 Yes No **If yes, please submit written reports of their observations, testing, or findings with this application.**
(Should your child transfer to another school, this written information will be kept confidential and will not be released without your written permission.)

Please list prescription medications your child is currently taking. _____

Is your child toilet-trained? _____

Please give information about your child that will be helpful to the teachers. For example: special interests or abilities, physical characteristics, strengths and weaknesses. _____

What role do TV, videos, DVDs, movies, and computer games play in your household? Frequency of watching (number of times a week). _____

What is your familiarity with Waldorf education? (For example, books read, lectures attended, friends.)

What are you hoping to find in this education for your child? _____

Parent(s) Signature(s) _____ Date _____

_____ Date _____

STATEMENT OF NON-DISCRIMINATORY POLICY: Shining Mountain Waldorf School does not discriminate on the basis of race, religion, or national origin in its admission policy or conduct of its educational programs.

Shining Mountain Waldorf School

999 Violet Avenue • Boulder, Colorado 80304 • (303) 444-7697 • Fax (303) 444-7701
www.smwaldorf.org

Early Childhood Parent Form

Today's date _____

Child's Full Name _____

Date of Birth _____
(mo/day/year)

Parent's Name _____

Occupation _____

Parent's Name _____

Occupation _____

Siblings Names & Ages _____

Others living in household _____

In order to give us a picture of your child, please fully answer these questions:

HOME LIFE—PLEASE DESCRIBE YOUR CHILD'S DAILY RHYTHM.

Waking (Time wakes by self, needs awakening, how is she/he upon waking?)

Dressing (By self, with help, who chooses clothes, comments)

Is your child completely toilet-trained?

Breakfast (Light or substantial, eaten together or alone)

Afternoon activities

After supper activities

Bedtime (Time, family ritual, how does your child sleep—light—heavy—medium? Comment?)

Food (Appetite, allergies, preferences)

TV, videos, radio, computers (Any of these in the home? Who uses them? Does child have access to them? Frequency of watching—number of times a week.)

Weekly/daily rhythm of school/pre-school/babysitter (Time leaving? By car? On foot? Number of times a week, until what time? Who picks up?)

What does your child love to do? (Interests, types of play, special activities)

CHILD DEVELOPMENT

Please indicate your child's age for these developmental milestones:

Sit up_____ Crawl_____ Walk_____ Talk_____

What do you see as your child's strengths and challenges?

Have you sought out any testing for your child (i.e., physical, behavioral, emotional, educational)?

SCHOOL EXPERIENCE

Where has your child attended until now?

How does your child make transitions at home and at school?

Please describe your child's social relationships with her or his peers (strengths and challenges).

OTHER

Will you need a **half day** (8:30am-12:30pm) or a **full day** (8:30am-3:00pm) for your child next year?

Do you anticipate using Aftercare (3:00-5:30pm)?

Do you have any questions or concerns?

PHOTOGRAPH

Please include a family photo, including your child, with your application.

Shining Mountain Waldorf School

999 Violet Avenue • Boulder, Colorado 80304 • (303) 444-7697 • Fax (303) 444-7701

www.smwaldorf.org

Please return form directly to Beverly Amico at Shining Mountain Waldorf School.

Childcare Provider / Teacher Questionnaire

Child's Name _____

Age _____

Present Teacher's Name _____

Position _____

Program Name _____

Size of Group _____

Date Child Began With You _____

1. Please describe child's disposition. Does it change during the day? Week?
2. How does the child play?
3. How does he/she respond to other children?
4. How does he/she respond to teachers?
5. Please give a brief description of a sample morning or afternoon with this child.
6. What is the biggest challenge you have had in working with this child? The most wonderful aspect?
7. Has the child shown any progress? Please describe.
8. Please describe your relationship to the parent, their involvement with your program, and their responsiveness to both their child and your concerns.
9. Feel free to add any other information you think would be helpful on the back of this paper. Thank you.