

WAYLAND ACADEMY

APPLICATION FOR ADMISSION

Kindly attach a
recent
photograph.

Year of Interest:	200__ / 200__
Grade applying to:	__9 __10 __11 __12
Applying as:	__Boarding __Day

**Student
Information:**

Name	Middle	Last
Preferred		

Address:

Street			
City	State	Zip	Country

Telephone:

Home	Fax
Email	

**Place
of Birth &
Birthdate**

City	State	Country
Month/Day/Year	Age	Social Security Number
Country of Citizenship	Religious Preference (optional):	

**Current
School &
Address:**

Name			
Street			
City	State	Zip	Country
Grade:			
Guidance Counselor:		Telephone:	

**Office of Admission
800.860.7725
920.885-3373 x241**

Family Information

	FATHER	MOTHER
Full Name:		
Home Address:		
City, State, Zip:		
Home Telephone::		
Fax Number:		
Email:		
Occupation/Title:		
Business Telephone:		
Secondary School:		
College:		
Citizenship:		

Names of Brothers/Sisters:	Current Grade:	School Attending:

If parents are separated or divorced:	
to whom should correspondence be directed?	
who has legal custody?	
with whom does applicant live?	

International Students

Must provide name, address, and telephone number of a contact person or guardian in the United States.

Name: _____

First	Middle	Last	Relationship
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Address:

Street
City State Zip Country

Telephone:

Home	Fax
Email	

Student Questionnaire

Applicant: Please complete the following questions.
If there is not sufficient space to answer a question, please attach a separate sheet.

Academic Information

1. Which subjects are of greatest interest to you?

2. On average, how many hours a day do you study: In school: _____ At home: _____

3. How would your teachers describe you as a student?

Extracurricular Activity Information

1. List your extracurricular activities (athletics, awards, community involvement, hobbies, positions of leadership, special interests).

2. Of all your activities, which is most important to you and why?

3. If you have held a job, briefly describe it and indicate the hours per week and dates employed.

4. What is the most interesting place you have ever visited other than on vacation?

5. What one thing would you like to do for which you do not now have time?

6. Realizing you may well change your mind, what do you see yourself doing when you finish your education?

7. (Boarding Students Only) Describe the type of roommate you would like to have at Wayland.

Application Checklist

- APPLICATION FORM AND FEE:**
Return the completed form with a \$50.00 non-refundable application fee (\$75.00 for international Candidates) to the Office of Admission, Wayland Academy, 101 N. University Avenue, Beaver Dam, WI 53916-2253.
- TRANSCRIPT(S):**
A transcript of your courses, credits and grades is very important to our review process. Please request that a copy is sent to the Office of Admission. The enclosed Request for Release of School Records should be used for this purpose. Ask your parents to sign the form and submit it to your current school.
- RECOMMENDATIONS:**
Information from at least two teachers will be used for admission and placement decisions. Each form should be returned directly to the Office of Admission.
- TESTING:**
Wayland requires applicants to submit scores from standardized testing such as SSAT, EXPLORE, PLAN, PSAT, SAT, ACT, Iowa Tests, Stanford Tests, Terra Nova, etc.
- INTERVIEWS:**
We expect that you and your parents will visit Wayland for an interview and tour. Please call the Office of Admission at 800.860.7725 for an appointment. Appointments are available Monday through Friday and on selected Saturday mornings. A campus visit requires approximately two hours.
- FINANCIAL AID/MERIT AWARDS:**
Wayland offers need-based financial aid, as well as academic and leadership merit awards. If you are interested in applying for either or both of these programs, please notify your Wayland Admission Counselor. Aid should be applied for as early as possible.

Wayland Academy does not discriminate in its educational programs and admission is open to students of any race, color, and national or ethnic origin.

Background Information

Has the applicant worked with an educational or psychological counselor? Yes No
If yes, details must be provided on a separate sheet. Provide reports with test data, dates taken, examiner's name, address, and send to the Wayland Admission Office.

Has the applicant had any involvement with legal authorities (other than minor traffic violations)? Yes No
If yes, details must be provided on a separate sheet.

In making this application, I subscribe to the principles and regulations stated in the catalog. I also realize that the financial obligation is for the year, and that there shall be no remission on the charge if the student is withdrawn or dismissed. It is my belief that all information which will assist in the successful development of my students at Wayland Academy has been included in or with this application. I understand that failure to disclose any pertinent information regarding the questions above could result in denial of admission or dismissal. The Academy may contact any individual listed in this application for additional information.

Signature of Parent/Guardian _____

WAYLAND ACADEMY
Office of Admission, 101 N. University Ave., Beaver Dam, WI 53916
fax 920.887.3373

Eric Peters, Dean of Admission and College Counseling
800.860.7725 or 920.885.3373 ext. 241

WAYLAND ACADEMY

Office of Admission
101 N. University Ave.
Beaver Dam, WI 53916
fax 920.887.3373

Recommendation Form #1

Name of Candidate _____
First Middle Last

The student whose name appears above is a candidate for admission to Wayland Academy, a college preparatory, boarding and day school with a diverse and motivated student body. Wayland students who succeed in this competitive environment do so because of their maturity, self-discipline and sense of responsibility.

We recognize that teachers and counselors play an important role in the educational life of individual students. Thank you for your cooperation and candid comments concerning this student's academic ability, achievement and character. All remarks will be kept strictly confidential.

1. Study habits: (industry, perseverance, initiative, promptness, ability to organize)

2. Academic achievement in relation to student's ability:

3. Personality and character: (leadership, sense of humor, integrity, responsibility, respect for others, emotional stability)

4. Are there any aspects of the student's family life, physical or emotional history, or situations in your school of which we should be aware?

5. In relation to students of the same age you have known, please rate this student by checking the appropriate space.

	Outstanding	Good	Poor
As a student	_____	_____	_____
As a person	_____	_____	_____

6. Comments:

7. ____ I recommend the applicant.

____ I recommend the applicant with reservation for the following reason:

____ I do not recommend the applicant for the following reason:

Signature:
Name:
Relationship to student:
School:
Street Address:
City, State, Zip:
Telephone:

Please return this form to:

WAYLAND ACADEMY
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Beaver Dam, WI 53916
fax 920.887.3373

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Recommendation Form #2

Name of Candidate _____
First Middle Last

The student whose name appears above is a candidate for admission to Wayland Academy, a college preparatory, boarding and day school with a diverse and motivated student body. Wayland students who succeed in this competitive environment do so because of their maturity, self-discipline and sense of responsibility.

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	Outstanding	Good	Poor
As a student	_____	_____	_____
As a person	_____	_____	_____

6. Comments:

7. ____ I recommend the applicant.

____ I recommend the applicant with reservation for the following reason:

____ I do not recommend the applicant for the following reason:

Signature:
Name:
Relationship to student:
School:
Street Address:
City, State, Zip:
Telephone:

Please return this form to:

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Office of Admission
101 N. University Ave.
Beaver Dam, WI 53916
fax 920.887.3373

Request for Release of School Records

To:

Name of Student _____ Grade _____

I authorize the release of my child's transcript, test scores and any related records, reports and evaluations, and request that they be sent to the Office of Admission at Wayland Academy. I also ask that you release updated transcripts and test scores to Wayland Academy as they may be requested.

Parent or Guardian's Signature _____ Date _____

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ACADEMY**

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