



# DETROIT COUNTRY DAY SCHOOL

## APPLICATION FOR ADMISSION

Please print or type name of student exactly as it should appear on permanent records.

If you require any accommodations to assist you in completion of this application or to fully participate in the application process, please contact the Director of Admission.

Date \_\_\_\_\_ Application for Grade \_\_\_\_\_ School Year \_\_\_\_\_

Name of Student \_\_\_\_\_  
first middle last

Female  Male Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ DCDS Faculty Child:  yes  no

Name of Present School \_\_\_\_\_ Present Grade \_\_\_\_\_

Principal \_\_\_\_\_ Counselor/Advisor \_\_\_\_\_

School Address \_\_\_\_\_  
street city state zip

School Phone \_\_\_\_\_ Type of School:  Public  Independent (day)  Independent (boarding)  Other

Student lives with: (Check any that apply)  Parent(s)  Legal Guardian(s) other than parent  Grandparent(s)

Parent Information: (Check all that apply)  Father Deceased  Mother Deceased

Name(s) of Legal Guardian(s) with whom student resides if other than parent \_\_\_\_\_

### PRIMARY HOUSEHOLD (where student resides)

**Mother's Name** \_\_\_\_\_  
first middle last

Home Address \_\_\_\_\_  
street city state zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Profession \_\_\_\_\_ Position \_\_\_\_\_ Business Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_

Business Address \_\_\_\_\_  
street city state zip

**Father's Name** \_\_\_\_\_  
first middle last

Home Address \_\_\_\_\_  
street city state zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Profession \_\_\_\_\_ Position \_\_\_\_\_ Business Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_

Business Address \_\_\_\_\_  
street city state zip

### SECONDARY HOUSEHOLD (if applicable)

#### **Mother/Stepmother/Female Guardian Information**

Mother's Name \_\_\_\_\_  
first middle last

Home Address \_\_\_\_\_  
street city state zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Profession \_\_\_\_\_ Position \_\_\_\_\_ Business Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_

Business Address \_\_\_\_\_  
street city state zip

**Father/Stepfather/Male Guardian Information**

Father's Name \_\_\_\_\_  
first middle last

Home Address \_\_\_\_\_  
street city state zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Profession \_\_\_\_\_ Position \_\_\_\_\_ Business Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_

Business Address \_\_\_\_\_  
street city state zip

How did you first hear about Detroit Country Day School?

- Admission Representative
- Alumnaus
- DCDS Summer Program
- Private Schools Catalogue
- Current Student
- Educational Consultant
- Faculty Member
- Guidance Counselor or Teacher
- Open House

Other \_\_\_\_\_

List Siblings: *(Please list names and schools they are currently attending)*

\_\_\_\_\_

List other relatives who currently attend or have previously attended Detroit Country Day School: *(Please state relationship)*

\_\_\_\_\_

Other college preparatory schools to which you are considering applying:

\_\_\_\_\_

**\*The application fee payment is due upon submission of this document.**

By signing below, I acknowledge and agree that this application will permit Detroit Country Day School to obtain and examine the academic and other school records of the applicant. This application, or the submission of school records or other information to Detroit Country Day School, does not obligate the school to admit my child/ward, or require me to attend Detroit Country Day School. All decisions regarding admission are within the sole discretion of Detroit Country Day School. Upon acceptance by Detroit Country Day School, an applicant's parent(s)/guardian(s) will be sent a certificate of acceptance, which acceptance is conditioned on a parent or guardian signing an enrollment contract and timely paying all deposits, tuition and fees. The enrollment contract will be mailed and must be fully completed and returned to Detroit Country Day School with the enrollment deposit. Upon timely receipt of the completed enrollment contract and deposit, and signature by the appropriate representative of Detroit Country Day School, the applicant will be formally enrolled in Detroit Country Day School. The enrollment deposit is applied to the tuition balance.

Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Legal Guardian

*Detroit Country Day School admits students of any race, color, religion, sexual orientation, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students in the school. The school does not discriminate on the basis of religion, race, color, national and ethnic origin, sexual orientation, or any other legally protected status under Michigan or federal law, in the administration of the school's admission, financial aid/loan, educational, athletic, employment and other school administered programs, policies and plans.*



# DETROIT COUNTRY DAY SCHOOL

## RELEASE OF RECORDS

Student Name \_\_\_\_\_ Student Date of Birth \_\_\_\_\_

Grade \_\_\_\_\_ School attended/attending \_\_\_\_\_

Home address when attending \_\_\_\_\_

School address \_\_\_\_\_

Please check purpose of request:

1.  Copies of checked records to be sent for admission application.
2.  Transfer of all cumulative records for enrollment to Detroit Country Day School.

Please check records requested:

- All school records
- Report cards
- Standardized test scores

By signing below, I hereby authorize \_\_\_\_\_ (name of current or prior school) to release to Detroit Country Day School all school records or other information as indicated above concerning my child or legal ward. I acknowledge and agree that all information sent or received may be used by Detroit Country Day School in connection with my child's/ward's application to Detroit Country Day School, and will not be transferred to a third party unless specifically required or allowed by law.

Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Legal Guardian

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
School representative requesting records

Please forward records to the appropriate school:

\_\_\_\_ Detroit Country Day School  
Admission Office  
Grade PK3 – Grade 4  
3600 Bradway Blvd  
Bloomfield Hills, MI 48301  
(248) 430-2740  
(248) 433-3729 (Fax)

\_\_\_\_ Detroit Country Day School  
Admission Office  
Grades 5 - 8  
22400 Hillview Lane  
Beverly Hills, MI 48025  
(248) 430-3655  
(248) 646-3459 (Fax)

\_\_\_\_ Detroit Country Day School  
Admission Office  
Grades 9 - 12  
22305 W. Thirteen Mile Road  
Beverly Hills, MI 48025  
(248) 430-3587  
(248) 646-2458 (Fax)

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# DETROIT COUNTRY DAY SCHOOL

## LOWER SCHOOL AND JUNIOR SCHOOL

### PARENT/GUARDIAN OVERVIEW & ASSESSMENT

*Please print or type student's name exactly as it should appear on permanent records.*

Student's Name: \_\_\_\_\_ Application for Grade \_\_\_\_\_

Detroit Country Day School is an independent, coeducational day school that provides a challenging educational experience for students in pre-kindergarten through grade 12. We value your overview and assessment of the student as an integral component of the student's application for admission. Please complete this form and return to:

**Lower School Applicants (Grade PK3- Grade 4)**  
Detroit Country Day School  
3600 Bradway Boulevard  
Bloomfield Hills, MI 48301  
Attn: Admission Office

If you require any accommodations to assist you in completion of this form or to fully participate in the application process, please contact the Director of Admission.

*Please be as specific as possible.*

**A: (PK3-Kindergarten) How have you prepared your child to begin school?**

Discuss the skills your child currently possesses and your expectations on how your child will relate to an early childhood educational experience at Detroit Country Day School.

**(Grades 1-4) What are your educational expectations and hopes for your child?**

Discuss your expectations for how your child will relate to an educational experience at Detroit Country Day School.

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**B: Describe your child's behaviors and interaction with others.**

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**C: Describe your child during play time alone and with others.**

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**D: To which extra-curricular activities or enrichment has your child been exposed? (sports, dance, music)**

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**E: What responsibilities does your child have at home?**

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**F: What does your child like most about school? (Respond “not applicable” if your child has not yet attended school.)**

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**G: Has your child reached the goals that you have set for him/her? Please explain.**

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H: What role do you see yourself playing in your child's educational journey?

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I: Are there any special circumstances about which you believe Detroit Country Day School should know in order to provide a safe and healthy educational environment for your child? If yes, please provide any pertinent information.

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Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Legal Guardian

Thank you for the interest you and your child/ward have taken in Detroit Country Day School.

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# DETROIT COUNTRY DAY SCHOOL

## TEACHER CONFIDENTIAL RECOMMENDATION

*To be completed by the student's current teacher. Please print or type.*

Student's Name \_\_\_\_\_ Current Grade \_\_\_\_\_  
First Last

Teacher's Name \_\_\_\_\_  
First Last

School Name \_\_\_\_\_ School Phone \_\_\_\_\_

School Address \_\_\_\_\_  
Street City State Zip

Application for Grade \_\_\_\_\_ School Year \_\_\_\_\_

Detroit Country Day School is an independent, coeducational day school that provides a challenging educational experience for students in pre-kindergarten through grade 12. We value your assessment of the student as an integral component of the student's application for admission. Please complete this confidential recommendation form and return to:

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 Detroit Country Day School  
 3600 Bradway Boulevard  
 Bloomfield Hills, MI 48301  
 Attn: Admission Office

### EMOTIONAL – SOCIAL – COGNITIVE DEVELOPMENT

The applicant:	Yes	No	Sometimes
expresses himself/herself clearly			
exhibits self-confidence			
shows mannerly and courteous behavior			
is intellectually curious			
interacts well with peers			
respects rights and property of others			
is able to focus attention on tasks for a reasonable period of time			
is able to follow directions			
exhibits appropriate self-control			

**COGNITIVE DEVELOPMENT** – Please provide a general statement regarding the applicant’s overall strengths and challenges:

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**Recent Tests and Scores:**

**SCHOOL / HOME RELATIONSHIP**

The parents:	Yes	No	Sometimes
are generally supportive of the school program			
are realistic about child’s abilities			

Do you recommend this student for admission to Detroit Country Day School? \_\_\_\_\_ Yes \_\_\_\_\_ No

Other pertinent information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If there is any additional information that could better be conveyed in a phone conversation, please feel free to contact the Director of Admissions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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