



Waolani Judd Nazarene School

Where faith and learning reflect the character of Christ

408 N. Judd Street, Honolulu, HI 96817 · 808-531-5252 · Fax: 1-866-586-WJNS (9567) · office@wjns.org · www.wjns.org

APPLICATION FOR ADMISSION

STUDENT INFORMATION: *(Please Type or Print)*

Grade applying to: PS 2's ___ PS 3's ___ PS 4's ___ Grade ___ School year for which you are applying ___

Name _____
Last First Middle Nickname (if any)

Address _____
Street City Zip Code Home Phone Number

Birthdate _____ Current Age _____ Birthplace _____ Gender: M ___ F ___

Language Spoken at Home _____ U.S. Citizen? Yes ___ No ___ If no, what country _____

Primary Family Email Address: _____

Church attends _____ Member? _____

FATHER OR LEGAL GUARDIAN:

 Relationship to applicant _____

Father's Name _____ Living with Child? Yes ___ No ___

Address *(if different from applicant)* _____
Street City Zip Code Home Number

Occupation _____ Business Phone Number _____

Employer _____ Cell Phone Number _____

MOTHER OR LEGAL GUARDIAN:

 Relationship to applicant _____

Mother's Name _____ Living with Child? Yes ___ No ___

Address *(if different from applicant)* _____
Street City Zip Code Home Number

Occupation _____ Business Phone Number _____

Employer _____ Cell Phone Number _____

ACADEMIC HISTORY:

Please list the last three schools the applicant attended (*list most recent school first*)

Name of school	Grade:	Dates attended (month and year):
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please tell us about your child's strengths: _____

Has your child received any special honors or awards for academic achievement? Yes____ No____

If so, please explain. _____

Has the applicant had serious discipline problems in school? Yes____ No____ If yes, please explain.

MEDICAL INFORMATION:

Has the applicant ever been diagnosed with or do you suspect that the applicant may have any learning disabilities or challenges? Yes____ No____ If yes, please explain. _____

Is your child on any type of medication? Yes____ No____ If yes, please list the medication and how often medication is administered? _____

Does your child have an IEP (Individualized Education Plan), IFSP (Individual Family Service Plan) or has the applicant ever been referred for or received special services? (e.g. speech/language, hearing, behavioral, or developmental delays) Yes____ No____ If yes, please explain so that WJNS can better understand and support the needs of your child. _____

How did you hear about us? Website ___ Internet ___ Radio ___ Referral ___ Alumni ___

Name of person who referred you to WJNS: _____

If you or a family member has attended WJNS, please share that information with us:

Name _____ Relationship _____ Years Attended _____

By signing this application, you attest all information is complete and correct to the best of your knowledge.

Signature

Relationship to Applicant

Date

***Please mail application and \$60 non-refundable application fee to:
Waolani Judd Nazarene School
408 North Judd Street
Honolulu, Hawaii 96817***

By submitting this application to Waolani Judd Nazarene School, you allow for the campus to include your contact information on any and all future mailings in regard to school information.

Waolani Judd Nazarene School does not discriminate on the basis of race, color, disability, sex or national and/or ethnic origin in the administration of educational policies and practice, athletic or other programs governed by the school. While WJNS does not discriminate against students with special needs, a full range of services may not always be available. Decisions concerning the admissions and continued enrollment of a student in WJNS are based upon the student's emotional, academic, and physical abilities and the resources available to WJNS in meeting each student's needs.

FOR SCHOOL USE ONLY

Date Application & Fee Received: _____ Cash _____ Check _____

Confirmation Sent: _____ Date of Tour: _____

Test/Observation: _____ Email Sent: _____

Accepted: Yes ___ No ___ Wait list ___ Acceptance Letter Sent: _____ Due Date: _____