



Name of Applicant:
LAST FIRST MIDDLE

Level Applying For:

Current School:

School Year:

Why would you like your daughter to study in Assumption? (If you have several reasons, please number them according to priority.)

What are the things/tasks that your daughter:

CAN DO WELL

LOVES DOING

NEEDS TO IMPROVE ON

Can you narrate to us sequentially your daughter's:

DAILY ROUTINE

ACTIVITIES DURING WEEKDAYS

ACTIVITIES DURING WEEKENDS

What are the values that you teach your children and why?

Are there any significant/traumatic experiences during your daughter's early years that you think and feel the school should know?

Are there any other information that you think and feel that the school should know about your daughter?

Parent's Printed Name and Signature

Date