

The Mandala School

6315 Hillside Court, Suite D, Columbia MD 21046 443.546.3551 info@mandalaschoolmd.org www.mandalaschoolmd.org

Admission Application

Stud	ont l	Intor	mation

Below are the steps necessary to complete your student's application. Carefully and legibly complete this form and submit it to The Mandala School to apply for admission.

First Name			Middle	Last Name	e Preferred or Nickname		
Home Address			City		State Zip Code		
Male	Female	Age	C	Pate of Birth	Country of Birth		
Email Address							
Home Phone N	Number						
Month/Year Pr	roposed Entra	nnce	Current G	Grade	Applying G	irade	
Ethnicity	y			Dominant	Language		
Asian			English	English			
American Indian or Alaska Native				French	French		
Black or African American				German	German		
Latino/Hispanic				Spanish	Spanish		
Native Hawaiian or Other Pacific Islander			Other	Other			
Bi-Racia	l or Mixed E	thnicity					
White	White						

Parent/Guardian Information			
Parent One/Guardian One Name	Last Name	Home Phone	Cell Phone
Male Female			
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Occupation of Parent One/Guardian One		Work Phone	
Parent One/Guardian One E-Mail Address	3		
Parent Two/Guardian Two Name	Last Name	Home Phone	Cell Phone
Male Female			
Occupation of Parent Two/Guardian Two		Work Phone	
Parent Two/Guardian Two E-Mail Address	5		
How did you hear about The Mandala Sch	nool?		
School Information			
Name of Present School			
Address	City	State	Zip Code
Reason(s) for leaving:			

Parents may help younger students complete the Student Questionnaire. However, responses need to be from the student. The following questions will help us learn a little more about you.
Describe your strengths.
Describe your weaknesses/areas of challenge.
What are your interests/hobbies?
What is your favorite subject and why?
What is your least favorite subject and why?
How do you interact with your peers?

Student Questionnaire

What excites you most about The Mandala School?				
Why do you think The Mandala School is a good fit for you?				
Please describe any social, academic, emotional, or physical/health needs you have.				
What else would you like us to know about you? Please feel free to use a separate sheet, if needed.				

Self-Assessment

Read and mark an "X" in the column that best describes you.

	Always	Frequently	Sometimes	Rarely	Never
Motivated I am a self-starter and can independently commit to tasks.					
Interests I am passionate about STEAM and Mindfulness topics.					
Natural Curiosity I am naturally curious and enjoy seeking information and answers to new ideas and concepts.					
Reasoning Ability I see patterns and relationships and how they connect. I also understand cause and effect.					
Problem Solving I am able to think outside of the box and provide multiple solutions to questions.					
Teamwork Skills I actively engage collaboratively with team members and am respectful of ideas offered by others and contribute to the team.					
Communication Skills I organize and express ideas with details.					
Leadership I am positive, trustworthy, have empathy for others, and maintain focus on the goals to accomplish.					
Project Based Learning I enjoy learning and then taking those skills and applying them to real life hands-on learning projects.					
Compassion for Community I enjoy being able to give back to others in my local community in any way that I am able to.					

Do you anticipate needing tuition scholarship assistance?	Yes No
If yes, we will discuss our partial and full scholarship prog	ams with you at your admissions interview.
Policies	
discriminate on the basis of any characteristic protected by informal assessment, evaluation of the enclosed application	I applicants. The school is a private institution and does not by law. Admissions decisions are made based on a school visit, on, previous academics as shown by a recent report card, if any other information the Admissions Committee deems
Application Process	
Below are the necessary steps to complete your student's	application:
Application Process	Date
Personal Tour or Virtual Tour with Head of Scho	ol
Submitted Application	
Submitted Copy of Birth Certificate	
Submitted Copy of Immunization Record	
Submitted Copy of Most Recent Report Card or	Progress Report
Completed Family Interview with Head of School	ol
Notes:	
Committee to evaluate The Mandala School's ability to ap	that this information is to be reviewed only by the Admissions propriately meet the educational needs of this student. ception, or omission in any aspect of the application process
Student Signature	Date
Parent One/Guardian One Signature	Date
Parent Two/Guardian Two Signature	Date
Please send this completed and signed document to anto	inette@mandalaschoolmd.org

Financial Assistance