

The Fairhaven Program: Family Application

Parents:

Name:

Phone:

Email:

Name:

Phone:

Email:

Address:

Student:

Name:

Birthday:

Current Grade and School:

Allergies or Health Concerns:

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What made you choose to apply to this program?

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What are your goals for your child over the next four years?

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How do you enjoy spending time together as a family?

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What role do you envision playing in your child's high school education?

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Would you like to participate in an occasional seminar or reading group for parents?

Are you interested in volunteering (e.g., hosting an end of year party)?