High School Admissions,
Continuous Enrollment and
Tuition Assistance Calendar

October 2019
• 2020-21 Application for Admission and Tuition Assistance (TA) Forms and Information Available.

RETURNING FAMILIES TO HWHS

January 2020
• Continuous enrollment documents mailed to current HWS families.

February 15, 2020
• Tuition Assistance application deadline for returning families first round consideration.

Please submit the Parent's Financial Statement (PFS), your 2019 Federal Income Tax forms (Form 1040) with Schedules, and W-2 forms online to SSS by this deadline.

Questions regarding the Tuition Assistance procedures or status of an award should be directed to HWS Business Office, at 808.878.2511, extension 17.

March 20, 2020
• Tuition Assistance Awards from the first round are mailed to re-enrolling HWHS families.

April 2020
• Tuition Collection for Payment Plan 2 begins

FAMILIES NEW TO HWHS

Fall 2019 - Winter 2020
• Interviews conducted with applicants who have submitted a complete Application for Admission and all supporting documents.

February 15, 2020
• Enrollment Application deadline for first round acceptance consideration.

Subsequent applicants will be considered and processed only as space allows.

March 1, 2020
• Tuition Assistance applications due for NEW families (for first round consideration). Go to School and Student Services (SSS) web site: www.solutionsbysss.com/parents

Follow the links to apply and be sure to enter the HWS school code: 3645

April 10, 2020
• Enrollment Decisions and Tuition Assistance Award notifications mailed to NEW families.

April 24, 2020
• Enrollment Forms, Continuous Enrollment Contract, Non-Refundable Deposit ($2,000) are due for all new students. Applicable TRP will be added to the first FACTS Payment (TRP is required to participate in the FACTS payment program)

May 2020
• Tuition Collection for Payment Plan 2 begins

ALL FAMILIES

July 1, 2020
• Tuition to be Paid in Full for all Payment Plan 1 Continuous Enrollment Contracts.
# Rates, Fees and Payment Schedule

## 2020-2021

**HALEAKALĀ WALDORF HIGH SCHOOL TUITION RATES 2019-2020**

<table>
<thead>
<tr>
<th>GRADE</th>
<th>PROGRAM</th>
<th>TUITION</th>
<th>NON-REFUNDABLE DEPOSIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRADES 9-12 *</td>
<td>(8:30 to 3:15 pm)</td>
<td>$18,600.</td>
<td>$2,000.</td>
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* EARLY RELEASE FRIDAYS - all classes dismiss early on Fridays at 1:40 pm.

### DEPOSIT AND FEES SCHEDULE

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<thead>
<tr>
<th></th>
<th>Amount</th>
<th>Due Date</th>
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<tr>
<td>New Students:</td>
<td>$2,000.</td>
<td>4/24/2020</td>
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### TUITION RECOVERY PROTECTION

The Tuition Recovery Protection (TRP) protects a family who withdraws during the school year by covering 60% of the unrealized tuition.

TRP is required for families paying on a payment Plan 2 and is optional for families paying in full before school starts (Plan 1).

### PAYMENT SCHEDULE

- **PLAN 1**  
  Payment in full (less new student deposit) due by 7/1/2020. TRP of $521 is optional.

- **PLAN 2**  
  New Students - Monthly payments (less deposit) beginning May 2020. TRP of $521. is required.
  Returning Students - Monthly payments. beginning April 2020. TRP of $521. is required.
In accordance with our aim to provide an education which develops a child’s full human potential, it is the intention and policy of the school to welcome students from the broadest possible range of social, economic, and cultural backgrounds.

HWS admits students of any race, sex, color, national and ethnic origin, religion, or sexual orientation to the School, and provides to each student all of the rights, privileges, programs, and activities generally accorded or made available to students at HWS. It does not discriminate on the basis of race, sex, sexual orientation, gender identity, age, religion, color, national origin, ancestry, disability, marital status, military service, genetic information, or any other category protected under federal or Hawai‘i law in the administration of its educational policies, employment policies, admissions policies, scholarship and loan programs, and athletic and other HWS-administered programs.

Please submit the following items:

- All information requested on the application form.
- A copy of applicant’s birth certificate.
- A current photo of applicant.
- Copies of transcripts, narratives, or report cards for all previous years of school attended. Please use the enclosed Consent for Release of Information Form to request this from your child’s current school.
- Math Teacher Letter of Reference
- English Teacher Letter of Reference
- Professional Letter of Reference — from teacher or school administrator.
- Optional sample of work that represents the applicant’s artistic or academic achievement. Please do not submit original works. HWHS will not be held responsible for lost or damaged items.
- $75 non-refundable application fee.

Our Enrollment Coordinator will contact you to arrange an entrance assessment interview once all documentation is received.
### Applicant Information

**Applicant’s full name**

**Birth date**

- Male
- Female

**Applicant’s Primary address**

City, State, Zip

**Applying for grade**

- for the academic year

**Place of Birth/State**

Country of Birth, if other than U.S.

- # Years in U.S.

**U.S. Citizen**

- Yes
- No

If not a U.S. Citizen, please indicate status:

- Immigrant
- Refugee
- Non-immigrant
- U.S. national (Samoa etc.)

We strive to create a diverse population of students and families. The question below is designed to give applicants an opportunity to identify themselves if they wish to:

- African-American
- Asian
- Aleutian/Native American Indian
- Caucasian
- East Indian
- European
- Hawaiian/Part-Hawaiian
- Hispanic
- Pacific Islander
- Other:

### Applicant’s Parent/Guardian 1

- Parent/Guardian Name
- Relationship to Applicant
- Mailing Address
- City, State, Zip
- Email Address
- Home Telephone
- Mobile Phone
- Work Phone
- Occupation
- Employer
- Spouse/Partner Name
- Relationship to Applicant
- Mobile Phone
- Work Phone
- Occupation
- Employer

### Applicant’s Parent/Guardian 2

- Parent/Guardian Name
- Relationship to Applicant
- Mailing Address
- City, State, Zip
- Email Address
- Home Telephone
- Mobile Phone
- Work Phone
- Occupation
- Employer
- Spouse/Partner Name
- Relationship to Applicant
- Mobile Phone
- Work Phone
- Occupation
- Employer

**Applicant’s parents are:**

- Married
- Separated
- Divorced
- Single parent
- Other:

- Is there a custody arrangement or court order in force regarding the child? Yes
- No

If yes, please provide custodial/court documents.

If parents are separated or divorced, who has legal custody?

To complete application process, please provide documentation of current custody agreement and contact information for all parent(s)/guardian(s).

**Will you be applying for Tuition Assistance?**

- Yes
- http://sssbynais.org/
- No

**Are you interested in learning more about our Diversity Scholarship?**

- Yes
- If yes, please apply for Tuition Assistance at http://sssbynais.org/
- No

**Please list responsible parties for applicants school tuition and other expenses:**

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<thead>
<tr>
<th>Name</th>
<th>Relationship to Applicant</th>
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<tbody>
<tr>
<td>Address</td>
<td>City, State, Zip</td>
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<td>Home Phone</td>
<td>Email</td>
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Please list all additional members of applicants household:

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<tr>
<th>Name</th>
<th>Age</th>
<th>Relationship to Applicant</th>
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Schools applicant has attended:

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<th>Attendance Dates</th>
<th>Grade(s)</th>
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Special Considerations
(leaving any question unanswered may delay your application)

Does the student have identified learning differences?  □ Yes  □ No

If yes, please address the following:
- Has an IEP or 504 plan ever been completed?  □ Yes  □ No
- Attach documentation of diagnosis and recommendations for school interventions and accommodations (prior school plan and/or learning assessment by an educational psychologist). Please list accommodations the student is currently receiving in school (formal or informal) if these are not described in any other documentation.

Does the student have significant behavioral or emotional problems?  □ Yes  □ No
If yes, please attach an explanation of the circumstances.

Has the student had a DSM-based diagnosis?  □ Yes  □ No
If yes, please attach an explanation of the circumstances and documentation.

Has the student ever left a school or other educational program for reasons other than graduation or family relocation?  □ Yes  □ No
If yes, please attach an explanation of the circumstances.

Has the student undergone treatment for substance abuse?  □ Yes  □ No
If yes, please attach an explanation of the circumstances and documentation of any treatment received.

Parent/Guardian Narrative

Please attach the answers to the following questions on an additional sheet.

1) Please describe your interest in Waldorf education and your reasons for applying the Haleakalā Waldorf School.

2) Please write a biography of the applicant, including your thoughts on significant events in your child’s life, their strengths and weaknesses, and specific examples that exemplify their character. Please include anything you think is important for us to know about your child.
Name of relatives and/or friends who attend(ed) HWS:


How did you first learn about HWHS?


Student Questionnaire

The following questions are to be completed by the prospective student.

What subjects do you enjoy the most?


What subjects do you enjoy the least?


Please list the school activities in which you participate. (clubs, teams, orchestra, etc.)


Please list activities outside school in which you participate. (hobbies, lessons, community service, etc.)


What, if any, musical instruments do you play?


What, if any, foreign languages do you speak?


What do you consider your greatest strengths and challenges as a student? (Attach additional sheet if needed)


What do you consider your greatest strengths and challenges as a person? (Attach additional sheets if needed)


Student signature: ___________________________ Date: __________

Signature of parent or guardian: ___________________________ Date: __________

Please enclose a non-refundable fee of $75 payable to Haleakalā Waldorf School with this application.
Name of Student: ___________________________________________ Applicant to grade: ______

The student named above is applying to Haleakalā Waldorf High School. A full report from the applicant’s present school is necessary if he or she is to be given consideration for admission. Our ability to effectively evaluate this student is helped considerably by your timely and candid insights. All information that you furnish will be kept confidential to the extent the law allows and will not be retained as a part of the student’s permanent record. On behalf of this student, we thank you for your cooperation.

Please complete this recommendation in black ink. Retain the original for your files and send a photocopy directly to HWHS.

Your name: ___________________________________________ Title: __________________

School: ___________________________________________

Address: ______________________________________ City: __________________ State: ______ Zip: ______

How long have you known the student? ___________________________________________

Student/Teacher ratio in your classroom: ___________________________________________

Please provide three words that best describe this student: ____________________________

COURSE DESCRIPTION

Course title: __________________________

Is this course sectioned according to ability? If yes, please describe how course is sectioned and note the placement of the applicant.

☐ Yes ☐ No

How often does the class meet? ________________________________________________

What text is used? ___________________________________________________________

Please estimate the percentage of time spent in the following areas:

Reading/literature __________________ Vocabulary development/spelling ____________

Grammar ____________________________ Writing skills _____________________________
The items below ask for your sense of this student’s emotional and social growth, intellectual development, and relationships within the school community. Please evaluate the student in the following areas by placing a check in the appropriate column.

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<td>Receptivity to others’ ideas</td>
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<td>Sensitivity to others’ feelings</td>
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<td>Responsibility</td>
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<td>Reaction to setbacks</td>
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<td>Sense of humor</td>
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What are the applicant’s strengths?

As a student? ____________________________________________

As a person? ____________________________________________

In which areas does this applicant need improvement?

As a student? ____________________________________________

As a person? ____________________________________________

Does the student attend class regularly? ☐ Yes ☐ No Is there a problem with tardiness? ☐ Yes ☐ No

If yes, please explain ___________________________________________________
To the best of your knowledge, if the student handed in a paper late it would probably be because the student:

☐ procrastinates  ☐ strives for perfection of expression  ☐ lost the rough draft

☐ has lots of other activities  ☐ does not apply; student's work is never late  ☐ other, please explain

How well does the student accept advice or criticism?

Which words best describe the student’s thinking?  ☐ Independent  ☐ Creative  ☐ Imitative  ☐ Other

Does this student have any particular interests or affinities you would like to share with us?

Is there any additional information that would be helpful to us in our evaluation of this applicant?

PARENT/SCHOOL RELATIONSHIP

Parents are an important part of our relationship with the student. To the best of your knowledge and with careful consideration to accuracy, please share with us any thoughts you have regarding this applicant’s family, including their involvement in your school.

To your knowledge, is the parents’ perception of their child compatible with the school’s understanding of the child? Please comment.

Are you aware of any family circumstances that affect the student’s life at school?

Additional comments:

Signature: ___________________________ Date: ___________________________

If we have additional questions, may we contact you?  ☐ Yes  ☐ No

If yes, phone number: ___________________________ Email: ___________________________

Thank you for your time and the helpful information you have provided.

Please mail this form to:
Haleakalā Waldorf High School, 4160 Lower Kula Road, Kula, HI 96790
Dear Teachers,
Please feel free to attach a separate letter of recommendation in lieu of filling out this form.
Thank you for your time and consideration.

Name of Student: ____________________________  Applicant to grade: ________

The student named above is applying to Haleakalā Waldorf High School. A full report from the applicant’s present school is necessary if he or she is to be given consideration for admission. Our ability to effectively evaluate this student is helped considerably by your timely and candid insights. All information that you furnish will be kept confidential to the extent the law allows and will not be retained as a part of the student's permanent record. On behalf of this student, we thank you for your cooperation.

Please complete this recommendation in black ink. Retain the original for your files and send a photocopy directly to HWHS.

Your name: ____________________________  Title: ________________

School: ____________________________

Address: ____________________________  City: ________________  State: ___  Zip: ______

How long have you known the student? ____________________________

Student/Teacher ratio in your classroom: ____________________________

Please provide three words that best describe this student: ____________________________

COURSE DESCRIPTION

Course title: ____________________________

Is this course sectioned according to ability? If yes, please describe how course is sectioned and note the placement of the applicant.

☐ Yes  ☐ No ____________________________

How often does the class meet? ____________________________

What text is used? ____________________________

What is the student's grade average? ____________________________

What would be the next course recommended for this student? ____________________________
The items below ask for your sense of this student’s emotional and social growth, intellectual development, and relationships within the school community. Please evaluate the student in the following areas by placing a check in the appropriate column.

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<td>Self-discipline</td>
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<td>Receptivity to others’ ideas</td>
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<td>Leadership</td>
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<td>Peer compatibility</td>
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<td>Relationship with teacher(s)</td>
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<td>Sensitivity to others’ feelings</td>
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<td>Responsibility</td>
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<td>Reaction to setbacks</td>
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<td>Maturity (relative to age)</td>
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<td>Sense of humor</td>
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What are the applicant’s strengths?

As a student? ____________________________

As a person? ____________________________

In which areas does this applicant need improvement?

As a student? ____________________________

As a person? ____________________________

Does the student attend class regularly? [ ] Yes [ ] No  
Is there a problem with tardiness? [ ] Yes [ ] No  
If yes, please explain ____________________________
To the best of your knowledge, if the student missed a problem, it would have been caused by:

- lack of effort
- misreading a question
- carelessness
- problem too difficult
- rarely an issue with this student
- other, please explain

How well does the student accept advice or criticism?

Which words best describe the student's thinking?

- Independent
- Creative
- Imitative
- Other

Does this student have any particular interests or affinities you would like to share with us?

Is there any additional information that would be helpful to us in our evaluation of this applicant?

PARENT/SCHOOL RELATIONSHIP

Parents are an important part of our relationship with the student. To the best of your knowledge and with careful consideration to accuracy, please share with us any thoughts you have regarding this applicant's family, including their involvement in your school.

To your knowledge, is the parents' perception of their child compatible with the school's understanding of the child? Please comment.

Are you aware of any family circumstances that affect the student's life at school?

Additional comments:

Signature: ____________________________ Date: ____________________

If we have additional questions, may we contact you? ☐ Yes ☐ No

If yes, phone number: ____________________________ Email: ____________________________

Thank you for your time and the helpful information you have provided.

Please mail this form to:

Haleakalā Waldorf High School, 4160 Lower Kula Road, Kula, HI 96790
Please complete this portion, sign and return with your Application for Admission.

Student Name: ___________________________  Present Grade: ___________________________

Parent(s) Name(s): ________________________________

Signature of Parent or Guardian: ___________________________  Date: ________________________

Records requested from:

School Name: __________________________________________

School Contact Person: ___________________________________

Address: _______________________________________________

Phone: ___________________________________________  Fax: ___________________________

Email: _______________________________________________

For office use only

Dear Registrar/School Official,

☐ Above named student is enrolling at Haleakalā Waldorf School.
Please forward complete permanent file (including all academic records, report cards, health records, special testing, etc.) to Haleakalā Waldorf School, 4160 Lower Kula Road, Kula, HI 96790.

☐ Above named student is applying for admission to Haleakalā Waldorf School.
Please forward a copy of student’s academic record to Haleakalā Waldorf School, 4160 Lower Kula Road, Kula, HI 96790.

To the School Business Manager (if applicable):
Has this family met their financial responsibility to your school?  Yes  No
Business Manager Name_______________________________________________________________
Phone Number _________________________ Email________________________________________

HWS Registrar: ___________________________  Date: ________________________

Thank for your immediate attention to this request.