



STUDENT APPLICATION FORM

To be completed by the student applicant
Deadline: June 30

Instructions: Please complete the questions in your own handwriting. Feel free to gather ideas from family and friends.

Your full name: _____

What I like most about my present school is: _____

What bothers me most about my present school is: _____

I hope Buffalo Creek Boys School: _____

An outdoor experience I'd love to participate in is: _____

What is one of your favorite outdoor places in Rockbridge County and why?

I'd like to attend BCBS because: _____

A great teacher is one who: _____

If I could choose any topic to learn about in school, it would be: _____

Some of my interests, talents and hobbies are: _____

My music instruction and/or experiences include: _____

I have participated in the following team or individual sports and fitness activities:

I am a member of the following club/programs: _____



PARENT/GUARDIAN APPLICATION FORM

To be completed by the applicant's parent/guardian

Deadline: June 30

Son's full name: _____

Son's mailing address: _____

Son's last completed grade: _____ Son's date of birth: _____

Son's current school: _____

If homeschooled, please attach summary of last year's coursework

Applicant lives with: Biological father ____ Biological mother ____
Guardian ____ Step-mother ____ Step-father ____ Foster parent ____
Adoptive parent ____

Name of Parent/Guardian: _____

Resident address if different from son: _____

Work address: _____

Name of company and your position: _____

Work phone: _____ Home phone: _____

Cell: _____ Email address: _____

Name of additional parent/guardian: _____

Work address: _____

Name of company and your position: _____

Work phone: _____ Home phone: _____

Cell: _____ Email: _____

Religious affiliation: _____

Denomination/current church congregation: _____

Are you a member of a local church? Yes _____ No _____

Please write a brief paragraph introducing your son to the Buffalo Creek Boys School:

In what ways might your son be a benefit to BCBS? _____

What do you hope your son will benefit from BCBS? _____

What are the names and ages of the other children living in your home? _____

How do you feel about your child taking "responsible risks" in teacher-led activities?

Are you comfortable with your son going on overnight field trips for one to four days as part of his education? If not, state why. _____

Please list all the information that applies in the following medical areas for your son:

Allergies _____

Medications and frequency _____

Learning related disabilities _____

Medical diagnosis _____

I have read and filled out all the information above truthfully and to the best of my knowledge. I understand that the BCBS board will review this information in consideration of my son as an applicant to Buffalo Creek Boys School.

Signature of parent/guardian

Date

Please return this application and your son's with a nonrefundable application fee of \$50 to: Buffalo Creek Boys School, 283 Mateer Rd., Lexington, VA 24450 [540-463-7785]

All fees, deposits and forms listed on the notification letter will be due August 1 to guarantee your son's admission into BCBS. If you have any questions or concerns, feel free to call us.

We look forward to the opportunity to partner with you in the education of your child.

Lee and Rebecca Taylor