

# MWS APPLICATION

2022-2023



## Teacher Feedback Form

### PARENT AUTHORIZATION

My child, named below, is applying to become a student at the Middle Way School (MWS) for the 2022-2023 school year. I authorize

\_\_\_\_\_ to release information regarding my child to MWS.

Teacher's name

Parent's signature

Date

STUDENT'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

SCHOOL \_\_\_\_\_ DATES ATTENDED \_\_\_\_\_



How would you describe this student's physical development?



How would you describe this student's emotional development?



How would you describe this student's social development?



How would you describe this student's cognitive development?



Please describe this student's learning style, passions, and interests.



Is there anything else you would like to add that would help us assess whether the Middle Way School is a good fit for this student and family?

*Teacher returns this form directly to:*  
**The Middle Way School | 268 West Saugerties Road | Saugerties, NY 12477**  
**admissions@middlewayschool.org**  
**845-246-5006**