

FOX RIVER COUNTRY DAY SCHOOL
Enrollment Referral Program

Last name of prospective family: _____

Mother's name: _____ Father's name: _____

Address:

Phone number: _____

Name of child: _____ Applying for grade: _____

Name of Fox River family making referral: _____

Instructions:

After speaking with a prospective family and determining that there is sufficient curiosity or interest,

1. Secure their permission to fill out a referral form.
2. Let the prospective family know that we will be in touch with them.
3. Fill out this form and deliver it to the Admissions Office.

To be filled out by the current Fox River family:

1. How do you know this family?

2. What makes you think our school would be a good match for them and the child?

3. What information about our school have you highlighted in discussions with them?

4. Have you encouraged them to visit the campus or explore our website?

5. Is there anything else you would like to add?

6. May we feel free to follow up?

Your signature

Date