



St. Luke's Episcopal School

Application for Admission

Applicant's Full Name: _____ / _____
Last First Middle Preferred Name

Date of Birth: _____ Male Female

Grade Applying For: _____ School Year Applying For: _____

If K2, K3, K4 or K5 please specify:

<input type="checkbox"/> K2 5 day full day	<input type="checkbox"/> K3 5 day full day	<input type="checkbox"/> K4 full day
<input type="checkbox"/> K2 5 day half day	<input type="checkbox"/> K3 5 day half day	<input type="checkbox"/> K4 half day
<input type="checkbox"/> K2 3 day full day	<input type="checkbox"/> K3 3 day half day	<input type="checkbox"/> K5 Full day
<input type="checkbox"/> K2 3 day half day	<input type="checkbox"/> K3 3 day full day	

Name of Present School: _____

Grade Completed: _____ Dates Attended: _____

FATHER/GUARDIAN: Mr. Dr. Rev. Other _____

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Cell Phone: _____

Work Phone: _____

E-Mail: _____

Occupation/Position: _____

Business/Employer: _____

Are you a St. Luke's Alumnus? Yes No

If Father is remarried, please list Stepmother:

MOTHER/GUARDIAN: Ms. Mrs. Dr. Rev. Other _____

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Cell Phone: _____

Work Phone: _____

E-Mail: _____

Occupation/Position: _____

Business/Employer: _____

Are you a St. Luke's Alumnus? Yes No

If Mother is remarried, please list Stepfather:

Who has legal custody? _____ Who will be responsible for payment? _____

Parents Married Parents Divorced Parents Separated Mother Deceased Father Deceased Other

Is either parent a member of St. Luke's Episcopal Church? Yes No

Religious Preference/Church Membership : _____

List all schools attended and give dates of attendance.

List any relatives who are either enrolled, have attended, or have graduated from St. Luke's.

List any siblings who are either enrolled, have attended, or have graduated from St. Luke's.

How did you hear about St. Luke's?

Has applicant ever been suspended, dismissed, asked to withdraw or received severe disciplinary action at any other school? Yes No

Has applicant ever been referred, tested or evaluated for social, educational or emotional problems?
Yes No

Has applicant ever been enrolled in any learning disability or other special program? Yes No

**If any of the above questions were answered yes, please provide a copy of the written reports or evaluations and name of the principal.*

Has applicant ever been arrested or subject to the Juvenile Justice system in any way? Yes No

I hereby make application for admission for my child to St. Luke's Episcopal School. Completion of this form does not obligate the family or the school to enroll the applicant. This decision is made at the conclusion of the admissions process.

Upper School students are subject to random drug testing as outlined in the Handbook. Hair analysis is the method used for drug testing. Submission of this application constitutes acceptance of the school policy both by parents and the student applicant.

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____