

**Application for Admission**

Office use only:

Application for \_\_\_\_\_ grade  
School Year \_\_\_\_\_

Date Application Rec'd \_\_\_\_\_  
\$75 Application Fee Rec'd \_\_\_\_\_ Ck # \_\_\_\_\_  
\$50 Screening Fee Rec'd \_\_\_\_\_ Ck# \_\_\_\_\_  
Status \_\_\_\_\_

**Applicant Information**

Child's Name \_\_\_\_\_  
Last First Middle Goes by  
Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Home Address \_\_\_\_\_ Zip \_\_\_\_\_

**Parent/Guardian Information**

Person with whom child resides: \_\_\_\_\_  
Last First Middle (no initial) Relationship to Child  
Address (if different) \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Cell/Pager \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Education: High School \_\_\_\_\_ College \_\_\_\_\_ Grad \_\_\_\_\_ Degree Earned \_\_\_\_\_  
University of \_\_\_\_\_  
Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_

Person with whom child resides: \_\_\_\_\_  
Last First Middle (no initial) Relationship to Child  
Address (if different) \_\_\_\_\_  
Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Cell/Pager \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Education: High School \_\_\_\_\_ College \_\_\_\_\_ Grad \_\_\_\_\_ Degree Earned \_\_\_\_\_  
University of \_\_\_\_\_  
Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_

Parents are: married \_\_\_\_\_ separated \_\_\_\_\_ divorced \_\_\_\_\_ single \_\_\_\_\_ widowed \_\_\_\_\_  
Billing Address (if different) \_\_\_\_\_  
School Correspondence sent to: both \_\_\_\_\_ custodial parents only \_\_\_\_\_

*Please see other side*





**School Information**

What schools has child attended (grades and city & state) \_\_\_\_\_  
\_\_\_\_\_

Name & address of current Principal \_\_\_\_\_  
\_\_\_\_\_

Has your child ever been retained? If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

Has your child ever been asked to leave a school? If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

Has your child ever had a psychological, educational, neurological, or speech evaluation? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what type, when and by whom? Type \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**Financial Aid**

Would you like financial aid information sent to you? Yes \_\_\_\_\_ No \_\_\_\_\_

**Religious Preference**

Religious Affiliation \_\_\_\_\_  
Father Mother Child

Name of Church \_\_\_\_\_

**Siblings**

<u>Name of Child</u>	<u>Sex</u>	<u>Date of Birth</u>	<u>School</u>	<u>Grade</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Have you or other children attended St. Luke's School?

If yes, \_\_\_\_\_  
Names Grade Year

**Referrals**

Who or what influenced you to apply to St. Luke's School? \_\_\_\_\_  
\_\_\_\_\_

Friends or relatives who attend or have attended St. Luke's School? \_\_\_\_\_  
\_\_\_\_\_

**Please include a current photograph of your child, a copy of their birth certificate and immunization records, and application fee.**

Signature of Parent/Guardian \_\_\_\_\_

**St. Luke's Episcopal Day School  
Teacher Evaluation  
Preschool through Kindergarten**

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Application for \_\_\_\_\_ School Year \_\_\_\_\_

The student named above has applied for admission to St. Luke's Episcopal Day School. We would appreciate your assessment of this student at this time. Your candid, thoughtful assessment of this applicant will be very helpful. This information will be kept confidential, and will not become part of the student's permanent file. If you have any questions concerning the requested information, please contact the school. Thank you for your assistance.

Please respond to the following:

1. Describe the student's relationship with teachers and other adults.
  
2. Describe the student's relationship with his/her peers.
  
3. Describe the parents' expectations of both the child and the school.
  
4. Rate the student's personal and academic characteristics in the following areas: (please feel free to comment)

	<i>Exceeds Expectations</i>	<i>Age Appropriate</i>	<i>Still Developing</i>
<i>Level of maturity</i>	_____	_____	_____
<i>Academic readiness</i>	_____	_____	_____
<i>Self-help skills</i>	_____	_____	_____
<i>Curiosity</i>	_____	_____	_____
<i>Listening skills</i>	_____	_____	_____
<i>Response to limits</i>	_____	_____	_____
<i>Self-directed</i>	_____	_____	_____
<i>Communication Skills</i>	_____	_____	_____

(Please see other side)

5. Please describe any special or unusual characteristics that you feel are important in evaluating this child. This may be a strength, weakness, or concern that you see as relevant.

6. Please include any additional comments that you feel are important.

7. I recommend this student:

with enthusiasm  
 with reservations

with some confidence  
 I do not recommend

Name of person completing evaluation \_\_\_\_\_ Title \_\_\_\_\_  
Relationship to applicant \_\_\_\_\_  
Length of time acquainted with student \_\_\_\_\_  
School \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Thank you for your assistance in completing this evaluation. Please fax this form or mail it directly to St. Luke's Episcopal Day School in the envelope provided by the child's parent.

**St. Luke's Episcopal Day School**  
**Attention: Admissions**  
8833 Goodwood Blvd. Baton Rouge, Louisiana 70806  
Phone: (225)927-8601



7. What are your child's activities and interests?
8. Does your child have any physical, emotional, or psychological characteristic that might affect your child's participation in daily activities?
9. Has your child ever had a psychological, educational, or neurological evaluation?

\_\_\_\_\_ yes                      \_\_\_\_\_ no

If yes, when and by whom?

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**St. Luke's Episcopal Day School**  
**Attention: Admissions**  
8833 Goodwood Blvd., Baton Rouge, Louisiana 70806  
(225)927-8601 Fax (225)928-2542