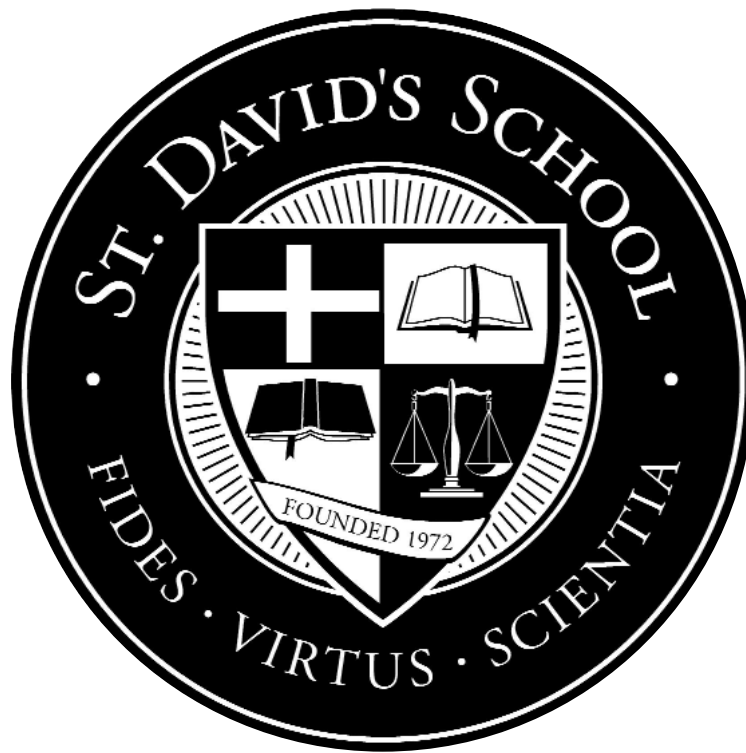


ADMISSION APPLICATION

5TH - 12TH GRADES



ST. DAVID'S SCHOOL

3400 WHITE OAK ROAD, RALEIGH, NC 27609 • 919-782-3331

WWW.SDSW.ORG

St. David's School's admission policy is non-discriminatory on the basis of race, color, religion, gender, nationality or ethnic origin.

ST. DAVID'S SCHOOL ADMISSIONS APPLICATION PROCESS

Thank you for your interest in St. David's School. Please refer to the Admissions Calendar enclosed in this application packet for specific dates and timeline information. The admission process is as follows:

APPLICATION:

To begin the application and admission process, St. David's School requires a completed application form and the application fee of \$75. Please refer to the Admissions Calendar for application deadlines. The fee is non-refundable and cannot be applied to tuition. Parents of students applying to **Pre-Kindergarten through grade 4** are required to complete a **Parent Observation**. Students applying to Middle School and Upper School, **grades 5 through 12**, are required to complete a **Student Questionnaire** which includes a **Writing Sample**.

STUDENT VISIT:

A classroom visit is required of all applicants with the exception of Pre-Kindergarten and Kindergarten applicants. (In lieu of individual classroom visits, small group assessments are scheduled for students applying to Pre-Kindergarten and Kindergarten.) Upon submitting your application, please contact the Admissions Office to schedule a classroom visit for your child. Students applying to **grades 1 through 12** are required to come for a **half-day visit**. All students will visit in their current grades. Summer applicants are not required to visit the classroom but will interview with the Director of Admissions.

PARENT VISIT:

The parent visit and tour offers an opportunity for families to meet the Admissions Staff, tour the campus, and learn more about St. David's School. Please contact the Admissions Office to schedule a visit and tour.

TESTING/ASSESSMENT:

Students applying to **Pre-Kindergarten through grade 2** will be assessed on pre-scheduled, group assessment days with a combination of screening tools that are age appropriate. Applicants to **grades 3 through 12** will take the appropriate admissions test administered at St. David's School, also on prescheduled, group test days. Please refer to the Admissions Calendar for the applicable test day or days for your child.

RECOMMENDATIONS AND SCHOOL RECORDS:

Applicants to **Pre-Kindergarten through grade 4** are asked to submit a Teacher Evaluation Form completed by their **current teachers**. Applicants to **grades 5 through 12** are required to submit 3 Teacher Evaluation Forms completed by the following current teachers: English/Language Arts, Math, and a Community Coach or Activity Leader. In addition, students applying to **grades 1 through 12** are required to submit academic records including grade and/or progress reports, report cards, or transcripts. All recommendations and evaluations must be sent directly to the Admissions Office from the applicant's current teacher or school.

ADMISSIONS COMMITTEE REVIEW:

All completed applications are reviewed by the Admissions Committee to determine whether the student and St. David's School are an appropriate match. Notification of the decision is mailed to the parents. (Please refer to the Admissions calendar for the applicable notification dates.) In the event a student meets the admission criteria but no space is available, the student will be offered the option of placement in a waitpool. Preference is given to siblings.

THE FOLLOWING FACTORS ARE CONSIDERED FOR ADMISSION TO ST. DAVID'S SCHOOL:

- The applicant's developmental readiness and/or level of academic achievement
- Evidence of the applicant's potential for success in a rigorous college-preparatory curriculum and program
- Evaluation of the applicant's personal qualities and the potential contribution the applicant will make to the school community
- Evidence of parental cooperation and support

ENROLLMENT:

An offer of enrollment must be confirmed by submitting an Enrollment Contract with the required deposit by the designated date. **The deposit is credited toward tuition and is not refundable.**

ST. DAVID'S SCHOOL ADMISSIONS CHECKLIST

Please keep the following checklist to assist you in completing your child's application. All relevant forms are found in the application folder. An application is complete when all steps have been satisfied and received in the Admissions Office.

The applicant is responsible for ensuring that all steps in the application process are completed.

ADMISSIONS APPLICATION: A student application file and the admission process is begun when a completed application form and the application fee of \$75 is received in the Admissions Office. Please refer to the Admissions Calendar for application deadlines. The fee is non-refundable and cannot be applied to tuition.

PARENT VISIT/CAMPUS TOUR: Please contact the Admissions Office to attend an Open House or to schedule a visit and tour. The parent visit and tour offers an opportunity for families to meet the Admissions Staff, tour the campus, and learn more about St. David's School.

STUDENT VISIT: A classroom visit is required of all applicants, with the exception of Pre-Kindergarten and Kindergarten applicants. (In lieu of individual classroom visits, small group assessments are scheduled for students applying to Pre-Kindergarten and Kindergarten.) Please contact the Admissions Office to schedule a visit to our campus.

ADMISSIONS TESTING:

- Students applying to **Pre-Kindergarten through grade 2** will be assessed on pre-scheduled, group assessment days with a combination of screening tools that are age appropriate.
- Applicants to **grades 3 through 12** will take the appropriate admissions test administered at St. David's School, also on prescheduled, group-test days.

Please refer to the Admissions Calendar for the applicable test day or days for your child.

ACADEMIC RECORDS (GRADES 1-12): Students applying to **grades 1 through 12** are required to submit academic records including grade and/or progress reports, report cards, or transcripts. All recommendations and evaluations must be sent directly to the Admissions Office from the applicant's current teacher or school.

FINANCIAL AID (if applicable): If applying for Financial Aid, please refer to the Financial Aid Policies and Application, or contact the Admissions Office for further information.

GRADES 5-12:

STUDENT QUESTIONNAIRE:

Each applicant to grades **5 through 12** should complete this in his or her own handwriting. The form must also be signed by the applicant and returned to the Admissions Office prior to the applicant's on-campus visit.

WRITING SAMPLE:

Each applicant writes about an experience from which he or she has learned a lesson. Please ensure that your child signs the form and that it is returned to the Admissions Office prior to the applicant's on-campus visit.

TEACHER EVALUATIONS:

Applicants to grades **5 through 12** are asked to submit **three Confidential Teacher Evaluation Forms** completed by their **current** teachers. Please give these forms to your child's current teachers along with stamped envelopes addressed to St. David's School. **These forms must be returned directly to St. David's School.**

- English/Language Arts
- Math
- Coach or other Instructor

All required forms are found in the Admissions Application Packet and may be obtained by calling the **Admissions Office at (919)-782-3331.**

All forms must be returned to the **Admissions Office** at the following address:

**St. David's School
Attention: Admissions Office
3400 White Oak Road
Raleigh, NC 27609**

Admission Notification letters for the 2012-2013 school year will be mailed on the following dates:

Pre-Kindergarten & Kindergarten	February 4, 2012
Grades 1-8	March 5, 2012
Grades 9-12	March 14, 2012

Applications for admission will continue to be considered throughout the year and enrollment will be offered on a space availability basis.

2011-2012 ST. DAVID'S SCHOOL ADMISSIONS CALENDAR

RECEPTIONS & OPEN HOUSES

Thursday, November 3rd	7-8:30 pm	Admissions Open House (PK-12)	Performing Arts Center
Thursday, November 10th	10-11 am	"Kindergarten: Ready or Not" (PK and K)	Performing Arts Center
Thursday, January 19th	7-8:30 pm	Admissions Open House (PK-12)	Performing Arts Center

GROUP TOURS AND INFORMATION SESSIONS

Wednesday, October 19th	9:30-11 am	Lower School (PK-4)	Welcome Center Conference Room
Wednesday, November 9th	9:30-11 am	Middle and Upper School (5-12)	Welcome Center Conference Room
Wednesday, November 16th	9:30-11 am	Lower School (PK-4)	Welcome Center Conference Room
Wednesday, December 7th	9:30-11 am	Middle and Upper School (5-12)	Welcome Center Conference Room

*****PLEASE CONTACT THE ADMISSIONS OFFICE TO MAKE A RESERVATION*****

APPLICANT GROUP TEST DATES

All group tests and individual visits for applicants to grades Pre-Kindergarten-12 must be scheduled through the Admissions Office. Please contact the Admissions Office at 919-782-3331 to schedule your child's test and visit days.

PRE-KINDERGARTEN APPLICANTS

Friday, January 6, 2012 (8:30; 10:00; 11:30 am)

KINDERGARTEN APPLICANTS

Thursday, December 1, 2011 (8:30; 10:00; 11:30 am)

Friday, December 2, 2011 (8:30; 10:00; 11:30 am)

Thursday, January 12, 2012 (8:30; 10:00; 11:30 am)

Friday, January 13, 2012 (8:30; 10:00; 11:30 am)

FIRST & SECOND GRADE APPLICANTS

Monday, January 23, 2012 (8:30; 10:00; 11:30 am)

Monday, February 6, 2012 (8:30; 10:00; 11:30 am)

THIRD & FOURTH GRADE APPLICANTS

Monday, January 30, 2012 (8:45-11:00 am)

Monday, February 13, 2012 (8:45-11:00 am)

FIFTH-TWELTH GRADE APPLICANTS

Please register for the Independent School Entrance Exam (ISEE) directly through their website at www.ISEETEST.org

Saturday, December 10, 2011 (8:30 am-12:30 pm)

Saturday, February 18, 2012 (8:30 am-12:30 pm)

Saturday, March 10, 2012 (8:30 am-12:30 pm)

Saturday, April 14, 2012 (8:30 am-12:30 pm)

ADDITIONAL ADMISSIONS DATES

APPLICATION DEADLINES:

Pre-Kindergarten and Kindergarten	Friday, January 13, 2012
Grades 1-8	Friday, February 10, 2012
Grades 9-12	Friday, February 24, 2012

NOTE: All admission forms (applications, transcripts, teacher evaluations, testing, etc.) are due to the St. David's School Admissions Office by the above, grade-appropriate dates.

NEW ENROLLMENT NOTIFICATION DATES:

<u>GRADE LEVEL</u>	<u>NOTIFICATION LETTERS MAILED</u>	<u>ENROLLMENT DEPOSITS DUE</u>
Pre-Kindergarten and Kindergarten:	Friday, February 10, 2012	Friday, February 24, 2012
Grades 1-8:	Monday, March 5, 2012	Monday, March 19, 2012
Grades 9-12:	Friday, March 16, 2012	Friday, March 30, 2012

FINANCIAL AID DATES:

Applications for 2012-2013 mailed to current and prospective families by request	Friday, November 4, 2011
Completed Parent Financial Statement (PFS) submitted online at www.nais.org/financialaid/sss or written application mailed to School and Student Services (SSS)	Friday, December 2, 2011
Submit Application for Financial Aid, PFS, and tax forms to Admissions Office	Friday, December 2, 2011

Applications for admission will continue to be considered throughout the year and enrollment will be offered on a space availability basis.

**ST. DAVID'S SCHOOL ADMISSIONS OFFICE
919-782-3331 OR WWW.SDSW.ORG**

ST. DAVID'S SCHOOL
APPLICATION FOR ADMISSION

ATTACH
PHOTO
HERE
(OPTIONAL)

APPLICANT

Name _____
first middle last

(Please print name exactly as it should appear on permanent records.)

Preferred Name _____ Male Female Applicant's Social Security (optional) _____

Home Address _____
street apt# city state zip

Phone (H) _____ Fax (H) _____ E-mail _____

Applicant's Date of Birth _____ Country of Birth _____ Citizenship _____

Current Grade _____ **Applying to Grade** _____

Present School _____ Years of Attendance _____
 Public Parochial Independent

School Address _____
street city state zip

Please select one of the following categories to describe your child's ethnicity (**optional**). African American
 Asian American Caucasian Latino/Hispanic American Middle Eastern American Native American
If you feel these categories do not accurately reflect your child's ethnicity, please clarify: _____

FAMILY INFORMATION

FATHER OR MALE GUARDIAN

Name (Dr./Mr./Rev.) _____
Address _____
City _____ State _____ Zip _____
Phone (H) _____ Mobile _____
Fax (H) _____
E-mail _____
Employer _____
Profession / Position _____
Address _____
City _____ State _____ Zip _____
Phone (W) _____ Fax (W) _____

MOTHER OR FEMALE GUARDIAN

Name (Dr./Mrs./Ms./Rev.) _____
Address _____
City _____ State _____ Zip _____
Phone (H) _____ Mobile _____
Fax (H) _____
E-mail _____
Employer _____
Profession / Position _____
Address _____
City _____ State _____ Zip _____
Phone (W) _____ Fax (W) _____

Check any that apply :

Student lives with?	<input type="radio"/> Father Deceased	<input type="radio"/> Mother Deceased	<input type="radio"/> Parents Separated	<input type="radio"/> Parents Divorced
	<input type="radio"/> Father & Mother	<input type="radio"/> Father	<input type="radio"/> Mother	
	<input type="radio"/> Guardian	<input type="radio"/> Stepfather	<input type="radio"/> Stepmother	<input type="radio"/> Other
Receive mail?	<input type="radio"/> Father	<input type="radio"/> Mother	<input type="radio"/> Guardian	<input type="radio"/> Other
Legal custody?	<input type="radio"/> Father	<input type="radio"/> Mother	<input type="radio"/> Guardian	<input type="radio"/> Other
Financial responsibility?	<input type="radio"/> Father	<input type="radio"/> Mother	<input type="radio"/> Guardian	<input type="radio"/> Other

ST. DAVID'S SCHOOL
STUDENT QUESTIONNAIRE

GRADES 5-12

Please complete this questionnaire in your own handwriting without assistance from anyone: your parents, your teacher, or your friends. Then mail to: **Admissions Office, St. David's School, 3400 White Oak Road, Raleigh, North Carolina 27609.**

Applying to grade _____ beginning Fall 20_____ Male Female

Print Full Name _____
first *middle* *last*

Age next September: _____ years, _____ months

Names of brothers and their ages:	Names of sisters and their ages:
_____	_____
_____	_____
_____	_____

Father's/Guardian's Name _____

Mother's/Guardian's Name _____

Home Address _____
street *apt #* *city* *state* *zip*

E-mail address (if applicable) _____

Name of current school _____ Your current grade level _____

List your present subjects and give your latest report card marks:

_____	_____	_____
_____	_____	_____
_____	_____	_____

List other schools you have attended and include which grade level(s):

Do you attend a local place of worship? (If yes, give name): _____

What are your thoughts on attending an Episcopal school that promotes Faith, Virtue, and Knowledge as its priorities?

Faith (i.e., chapel services) _____

Virtue (i.e., honor system) _____

Knowledge (i.e., college prep environment) _____

ATHLETIC TEAMS: _____

OTHER GROUP ACTIVITIES (Church, etc.): _____

TRAVEL: _____

HOBBIES: _____

JOBS IN AND OUTSIDE THE FAMILY (may include volunteer and service work): _____

POSITIONS OF LEADERSHIP OR RESPONSIBILITIES YOU HOLD (in your school, church, community):

In the space provided on this page and the next page, write about an experience which taught you a lesson. Feel free to attach extra paper if you need more space.

ST. DAVID'S SCHOOL

3400 White Oak Road, Raleigh, NC 27609 • 919-782-3331 • www.sdsd.org

CONFIDENTIAL TEACHER EVALUATION FORM

Applicant's Name: _____ Current Grade Level: _____

WAIVER OF RIGHTS TO CONFIDENTIAL INFORMATION

I waive all my rights to this evaluation.

Parent/Guardian Signature

Date

I taught this student for _____ years. I have known this student for _____ years.

Name of Subject _____ Grade _____

Please assess the above named student in relation to peers and present school. Additional comments are appreciated and may be attached separately. Return this form directly to the St. David's School Admissions Office.

ACADEMIC PERFORMANCE:

	Superior/Excellent	Good	Average	Below Average	Poor
Facts/computation skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concepts/problem-solving skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attitude towards subject	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abstract thought	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to work independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Organization/neatness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Completion of work on time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral expression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PERSONAL CHARACTERISTICS:

	Superior/Excellent	Good	Average	Below Average	Poor
Peer relations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respect for authority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reaction to criticism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-confidence/Self-esteem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sense of humor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MATH TEACHER

Continued on back

Please make a short comment on the following:

Parental support and involvement:

Has outside help been recommended? Yes No Been given? Yes No

Applicant's social and emotional development compared with others of the same chronological age:

Respect accorded by adults/peers:

Greatest strength:

Name (please print)

Signature

Position

Date

School Name

Telephone

School Address

CONFIDENTIAL
TEACHER
EVALUATION
FORM

MATH
TEACHER

**ST. DAVID'S
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3400 White Oak Road
Raleigh, NC 27609
919-782-3331
919-232-5053 (fax)
www.sds.org

ST. DAVID'S SCHOOL

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CONFIDENTIAL TEACHER EVALUATION FORM

Applicant's Name: _____ Current Grade Level: _____

WAIVER OF RIGHTS TO CONFIDENTIAL INFORMATION

I waive all my rights to this evaluation.

Parent/Guardian Signature

Date

I taught this student for _____ years. I have known this student for _____ years.

Name of Subject _____ Grade _____

Please assess the above named student in relation to peers and present school. Additional comments are appreciated and may be attached separately. Return this form directly to the St. David's School Admissions Office.

ACADEMIC PERFORMANCE:

	Superior/Excellent	Good	Average	Below Average	Poor
Reading skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Writing skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grammar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Originality of thought	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to work independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Organization/neatness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Completion of work on time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oral expression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PERSONAL CHARACTERISTICS:

	Superior/Excellent	Good	Average	Below Average	Poor
Peer relations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respect for authority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reaction to criticism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-confidence/Self-esteem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sense of humor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please make a short comment on the following:

Parental support and involvement:

Has outside help been recommended? Yes No Been given? Yes No

Applicant's social and emotional development compared with others of the same chronological age:

Respect accorded by adults/peers:

Greatest strength:

Name (please print)

Signature

Position

Date

School Name

Telephone

School Address

CONFIDENTIAL
TEACHER
EVALUATION
FORM

ENGLISH/
LANGUAGE
ARTS
TEACHER

**ST. DAVID'S
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ST. DAVID'S SCHOOL

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CONFIDENTIAL EXTRACURRICULAR EVALUATION FORM

Applicant's Name: _____ Current Grade Level: _____

<p>WAIVER OF RIGHTS TO CONFIDENTIAL INFORMATION I waive all my rights to this evaluation.</p>	
<p>_____</p> <p><i>Parent/Guardian Signature</i></p>	<p>_____</p> <p><i>Date</i></p>

Name of Activity in which you instructed this student: _____

This student has been involved in this activity for _____ years.

I have known this student for _____ years.

Please assess the above named student in relation to peers and present school or organization. Additional comments are appreciated and may be attached separately. Return this form directly to the St. David's School Admissions Office.

PERFORMANCE:

	<u>Excellent</u>	<u>Very Good</u>	<u>Good</u>	<u>Average</u>	<u>Below Average</u>
Peer relations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respect for authority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reaction to criticism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-confidence/self-esteem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal initiative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Focus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Appropriate conduct and language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to work well with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical fitness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please make a short comment on the following:

Applicant's social and emotional development as compared with his/her peers:

Parental support and involvement:

Respect accorded by adults/peers:

Ability to deal with disappointment:

Greatest strength:

Name (please print)

Signature

Position

Date

School or Organization Name

Telephone

School or Organization Address

CONFIDENTIAL
EXTRA-
CURRICULAR
EVALUATION
FORM

COACH
•
INSTRUCTOR
•
LEADER

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TRANSCRIPT RELEASE AUTHORIZATION

(To be signed and submitted by parent to the applicant's current school.)

TO: Principal or Guidance Counselor

My child is an applicant for admission to St. David's School. I hereby authorize you to release to St. David's School the following records: a certified copy of the complete transcript (including grades, credits, and all standardized test results) and immunization and health records.

Name of student: _____
first middle last

Date: _____ Current Grade Level: _____

Name of current school: _____

School phone: _____ Signature of parent: _____

CONFIDENTIAL EVALUATION:

Name of Principal or Guidance Counselor: _____

1. In what capacity and for how long have you known the student?
2. Please comment on the student's attitude toward school:
3. To your knowledge, has the student had any involvement with drugs, alcohol, or juvenile delinquency? Yes No
4. Has the student ever been suspended? Yes No Expelled? Yes No If yes, please explain:
5. To your knowledge, has the student had any history of conduct or behavior problems? Yes No If yes, please explain.
6. Does the student have a history of learning disability supported by a diagnostic evaluation? Yes No
Does he/she require special assistance to meet academic requirements? Yes No If yes, please explain.
7. Additional comments, if needed.

Signature

Date

