



## Saint Paul's School Admissions Process Checklist

- Parent Tour (Optional)
- Application & Fee (\$75)
- Student Testing
- Student Classroom Visit or Screening
- Student Report Cards & Test Scores
- Teacher Recommendation Form

The Admissions Committee endeavors to enroll qualified students from diverse backgrounds who can benefit from the challenges of a Saint Paul's education.

If you have any further questions about the admissions process, please call the Admissions Office at (727) 536-2756 or email

[Admissions@st.pauls.edu](mailto:Admissions@st.pauls.edu)



# Saint Paul's School

1600 St. Paul's Drive • Clearwater, FL • 33764-6498 • (727) 536.2756 • Fax (727) 531.2276

## ADMISSION APPLICATION

20\_\_\_\_ - 20\_\_\_\_

Applying for  
Grade K-8  
Grade \_\_\_\_\_

STUDENT INFORMATION

**Student's Full Name** \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Preferred Name \_\_\_\_\_

Home Telephone # ( ) \_\_\_\_\_ Religion (Optional) \_\_\_\_\_

Ethnic Group (Optional)  African American  Caucasian  Middle Eastern  Multiracial  
 Asian American  Latino/Hispanic  Native American  Other

Student's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Student's Present School \_\_\_\_\_ Present Grade \_\_\_\_\_

Present School's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Present School's Telephone # ( ) \_\_\_\_\_

### Previous School(s) Attended:

Name of School	Address	City/State/Zip	Dates

FAMILY INFORMATION

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Work Telephone # ( ) \_\_\_\_\_ Work Telephone # ( ) \_\_\_\_\_

Cell Telephone # ( ) \_\_\_\_\_ Cell Telephone # ( ) \_\_\_\_\_

Home Telephone # ( ) \_\_\_\_\_ Home Telephone # ( ) \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

Legal Gardian (if different from above) \_\_\_\_\_ Telephone # ( ) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

### Siblings:

Name of Sibling	Date of Birth	School Attending

### Additional Family Information

Other Persons Living in Home \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Language(s) Spoken in Home \_\_\_\_\_

**Student's Health Data**

General Health of Child:     Excellent     Good     Fair     Poor

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Any serious allergies, disabilities, or other medical conditions of which the school should be aware?

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Current Prescribed Medications

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Student's Interests, Hobbies, and Activities

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As a parent/guardian, how would you describe your child?

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How did you learn about Saint Paul's School?

Parental reasons for choosing Saint Paul's School:

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Would you like financial assistance forms?     Yes     No

**This application must be accompanied by a non-refundable application fee of \$75.00.**

I certify that the information described in this application is true and complete. I understand that all admission materials will remain confidential.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Saint Paul's School admits students of any race, creed, color, or ethnic national origin and does not discriminate on the basis of any of these in the administration of admissions, educational, financial aid, athletic, or any other programs.

