



# St. Matthew's Episcopal Day School

## APPLICATION FOR ADMISSION

Please attach recent photo here. The photo is used for identification purposes only.

MALE    FEMALE

### APPLICANT

\_\_\_\_\_  
FULL LEGAL NAME PREFERRED NAME

\_\_\_\_\_  
HOME ADDRESS

\_\_\_\_\_  
PHONE DATE OF BIRTH CURRENT AGE

\_\_\_\_\_  
GRADE APPLYING FOR

YES    NO

\_\_\_\_\_  
HAS THE APPLICANT APPLIED TO ST. MATTHEW'S BEFORE? WHAT YEAR?

\_\_\_\_\_  
HOW DID YOU LEARN ABOUT ST. MATTHEW'S?

\_\_\_\_\_  
PRIMARY LANGUAGE OTHER LANGUAGES ETHNIC BACKGROUND (OPTIONAL)

### PARENT

\_\_\_\_\_  
FULL LEGAL NAME

\_\_\_\_\_  
HOME ADDRESS

\_\_\_\_\_  
HOME PHONE WORK PHONE HOME EMAIL

\_\_\_\_\_  
EMPLOYER OCCUPATION/POSITION

\_\_\_\_\_  
ARE YOU A ST. MATTHEW'S ALUMNA/ALUMNUS? IF SO, WHAT YEARS DID YOU ATTEND?

### PARENT

\_\_\_\_\_  
FULL LEGAL NAME

\_\_\_\_\_  
HOME ADDRESS

\_\_\_\_\_  
HOME PHONE WORK PHONE HOME EMAIL

\_\_\_\_\_  
EMPLOYER OCCUPATION/POSITION

\_\_\_\_\_  
ARE YOU A ST. MATTHEW'S ALUMNA/ALUMNUS? IF SO, WHAT YEARS DID YOU ATTEND?

**GRANDPARENTS**

MATERNAL GRANDPARENTS

HOME ADDRESS

HOME PHONE

HOME EMAIL

OCCUPATION

PATERNAL GRANDPARENTS

HOME ADDRESS

HOME PHONE

HOME EMAIL

OCCUPATION

**FAMILY**

SIBLING NAME

AGE

GRADE

SCHOOL ATTENDING

SIBLING NAME

AGE

GRADE

SCHOOL ATTENDING

SIBLING NAME

AGE

GRADE

SCHOOL ATTENDING

SIBLING NAME

AGE

GRADE

SCHOOL ATTENDING

WHAT IS YOUR RELIGIOUS AFFILIATION?

ARE YOU A CONTRIBUTING MEMBER OF THE EPISCOPAL CHURCH OF ST. MATTHEW?

IF PARENTS ARE SEPARATED, WHO IS THE CUSTODIAL PARENT?

**EDUCATIONAL  
BACKGROUND**

CURRENT SCHOOL

PHONE

ADDRESS

CURRENT TEACHER'S NAME

HAS THE APPLICANT EVER SKIPPED OR REPEATED A GRADE? WHICH ONE AND THE CIRCUMSTANCES INVOLVED.

HAS THE APPLICANT EVER REQUIRED SPECIAL TUTORING? IN WHICH AREA?

HAS SCHOOL ATTENDANCE BEEN STEADY AND REGULAR? IF NOT, PLEASE EXPLAIN.

HAS THE APPLICANT EVER BEEN SUBJECT TO MAJOR DISCIPLINARY ACTION IN ANY SCHOOL? PLEASE DESCRIBE.

IN ORDER TO BETTER UNDERSTAND THE LEARNING NEEDS OF OUR APPLICANTS AND WAYS IN WHICH ST. MATTHEW'S CAN MEET THESE NEEDS, PLEASE INDICATE ANY SPECIAL ACADEMIC OR PHYSICAL ACCOMMODATIONS S/H/E IS CURRENTLY RECEIVING. ATTACH ANY TESTING OR DOCUMENTATION THAT SUPPORTS THESE ACCOMMODATIONS.



