

St. Mark's School Application

Applying for _____ Grade 2026-2027
Wait List for _____ Grade 2026-2027

Student's Full Legal Name: _____

Present Grade: _____ Last _____ Middle _____ First _____ Preferred Name/Nickname _____
Birth Date: _____ Male Female

Ethnicity: African American Asian Anglo Native American Hispanic Other _____

Home Address: _____
Number and Street

City _____ State _____ Zip Code _____ Home Phone _____

Family Information: Father _____ Mother _____

Full Name: _____

Business/Employer: _____

Business Address: _____

Email Address: _____

Telephone (cell): _____

Home Address: _____ (If different) _____

Child Lives With: Both Parents Grandparents Other Guardian: _____

Previous School your child attended: _____
(If the student has had disciplinary issues or has been expelled from previous school, St. Mark's has the right to refuse admission.)

Other children in family:

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

Emergency Contact & Authorized Pick-Up Information:

Name: _____ Relationship: _____ Cell: _____

Name: _____ Relationship: _____ Cell: _____

Name: _____ Relationship: _____ Cell: _____

Medical & Personal Information:

St. Mark's School does not employ Special Education teachers or aides and reserves the right to refuse and/or terminate enrollment as deemed necessary by the school's administration. In special circumstances, the school may require that parents of special needs students hire a teacher's aide to attend school with the child.

Pediatrician: _____ Name _____ Address _____ Phone _____

Dentist: _____ Name _____ Address _____ Phone _____

Hospital Preference: _____ Allergies: _____

Has the student been identified as having educational or physical needs? _____ If yes, please explain: _____

Has the student had a serious accident or illness? _____ If yes, please explain: _____

Has the student had psychiatric/psychological counseling? _____ If yes, please explain: _____

Student's religious preference: _____ Place of worship: _____

Based on your physical address, which public school would your child attend? _____

What influenced you to select St. Mark's School as an educational option? _____

Has your child been expelled or suspended from school? If yes, please explain: _____

Person(s) to whom all financial correspondence and bills should be sent to:

Name: _____ E-mail: _____

Mailing Address: _____ Phone: _____

Admission to St. Mark's is contingent upon the following:

- A. Submission of this application with a Non-Refundable \$500.00 Registration Fee & Security Fee**
- B. Application will not be accepted unless the following documents are included: Student Enrollment Contract, Liability/Permission Statement, Birth Certificate, Immunization Records, School Transcripts, Academic Disciplinary Record, Standardized Test Scores and Custody Documents. St. Mark's School does not accept immunization exemption affidavits and students will not be able to attend school unless all immunizations are current. Students must continue to update immunizations.**

My signature verifies that all information provided is true and accurate.

Parent/Guardian Signatures:

Father (or Guardian) _____ Date: _____

Date: _____

Mother (or Guardian) _____ Date: _____