



# St. Mark's Episcopal School

7615 F. M. 762, Richmond, Texas 77469

Phone: (281) 545-1296

Web: [www.smes.rocks](http://www.smes.rocks)

Fax: (325) 480-8997

Facebook: St. Mark's Episcopal School—Richmond Texas

## APPLICATION FOR ADMISSION

*A \$100.00 non-refundable application fee must accompany this application.*

### Our Mission

The mission of St. Mark's Episcopal School is to encourage spiritual, intellectual, social, emotional, and physical development in young children through an enriched curriculum, rooted in the Christian faith.

Date of application : \_\_\_\_\_ for admission \_\_\_\_\_ of \_\_\_\_\_  
(Month) (Year)

Applicant : \_\_\_\_\_  
(student) (Last) (First) (Middle) (Preferred)

Address: \_\_\_\_\_  
(Full address including zip) (Street) (City) (State/Zip)

Home telephone number: \_\_\_\_\_ Cell number: \_\_\_\_\_

Preferred family email: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

The school your child is currently attending \_\_\_\_\_

Father/Guardian: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Program	2 days	3 days	5 days
18 mos	n/a	<input type="checkbox"/>	<input type="checkbox"/>
2's	n/a	<input type="checkbox"/>	<input type="checkbox"/>
3's	n/a	<input type="checkbox"/>	<input type="checkbox"/>
Pre-K	n/a	n/a	<input type="checkbox"/>
Bridge-K	n/a	n/a	<input type="checkbox"/>

- Student must be the age of the class enrolling by September 1<sup>st</sup>.
- Bridge -K is for the students who turn 5 years old during the summer or early fall who could benefit from the gift of time.

Will you be registering for the "Before and After School Care Program?" YES ☐ NO ☐

## FAMILY INFORMATION

If parents are separated or divorced, which parent has custody of the applicant? \_\_\_\_\_

Please provide address for non-custodial parent below:

\_\_\_\_\_  
(Full address including zip)

(Street)

(City)

(State/Zip)

## MEDICAL

Please list any allergies, medical conditions, illnesses or diseases that may affect your child's general health: \_\_\_\_\_

Are any of these severe/potentially life threatening? \_\_\_\_\_

Please list any special physical, behavioral, psychological or educational needs or diagnoses that may require special support: \_\_\_\_\_

## NON-DISCRIMINATION

St. Mark's Episcopal School does not discriminate on the basis of race, color, sexual orientation, religion, national or ethnic origin in the administration of its admissions and education policies, financial assistance programs, employment practices, and other school-administered programs.

## TUITION

Are you applying for tuition assistance? YES NO

What payment schedule would you prefer for annual tuition payments? (refer to tuition & fees sheet)

Annual Tuition (Aug 1) ☐

(single payment in advance)

Ten Monthly (Aug 1—May 1) ☐

(Non-refundable security deposit required)

How did you learn about St. Mark's Episcopal School? \_\_\_\_\_

Are you interested in receiving information from St. Mark's Episcopal Church? Yes No

Person Responsible for fees and tuition: \_\_\_\_\_

Preferred email Address: \_\_\_\_\_

Date application was received: \_\_\_\_\_ Payment \_\_\_\_\_