

# Application for Admission

## SOUTHFIELD SCHOOL

**Please fill out ALL of the following. Incomplete applications will be returned for additional information.**

Full Name of Applicant \_\_\_\_\_

Home Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Present Grade \_\_\_\_\_ Application for \_\_\_\_\_  
Grade/Year Preschool-2,3,4: 5-day \_\_\_ | Preschool-3: 3-day \_\_\_

Present School \_\_\_\_\_ Public \_\_\_\_\_ Private \_\_\_\_\_

Address of present school \_\_\_\_\_

City State Zip

Principal/School Head \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

List all previous schools (including preschools) the applicant has attended:

SCHOOL	CITY/STATE	DATES	GRADES
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**FATHER**

**MOTHER**

Full Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Occupation/position \_\_\_\_\_

Business Employer \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

College(s) attended \_\_\_\_\_

Are parents divorced? \_\_\_\_\_ Separated? \_\_\_\_\_ If either, name of parent or guardian with whom the applicant is living \_\_\_\_\_

Applicant's brothers and sisters:

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ School attending \_\_\_\_\_

Name \_\_\_\_\_ Date of birth \_\_\_\_\_ School attending \_\_\_\_\_

Members in applicant's family who have attended or are now attending Southfield School and their relationship to the applicant:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Year grad./attended \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Year grad./attended \_\_\_\_\_

Please indicate how you became interested in Southfield: \_\_\_\_\_

Has the applicant ever skipped or repeated a grade? If so, indicate the grade and circumstances:

Describe any special circumstances which have affected the applicant's performance in school. (For example, illness or physical handicaps, particular learning difficulties, or frequent changes in homes or schools.)

Has the applicant ever been withdrawn from another school for academic or disciplinary reasons at the request of the school administration? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain the circumstances:

Describe the applicant's general health (include any special physical and/or medical considerations or limitations:)

Describe any unusual talents or achievements the applicant has shown either in or outside of school:

If tuition assistance is requested, upon receipt of the application, the appropriate form will be sent to you. Is tuition assistance requested? Yes \_\_\_\_\_ No \_\_\_\_\_

- Admission is open to academically qualified students, without regard to race, creed, color, or gender.
- This form should be accompanied by a \$50.00 nonrefundable application fee.
- For students entering grades 1 through 8, the parent should also arrange for all TRANSCRIPTS and testing results from previous schools to be sent to Southfield School. **An application is not complete until all documents are received. Please review the information on the Admission Process insert.**

Signature of Parent or Legal Guardian

Date

**Upon completion of this application, please return form and nonrefundable \$50 application fee (check or money order) to: Admission Director, Southfield School, 1100 Southfield Road, Shreveport, LA 71106**