



Application for Admission

To be completed by parent

Full Name of Student _____ Preferred Name _____
Last First Middle

Date of Birth _____ Current Grade _____ Applying for Grade _____ School Year _____

Address of Applicant _____
Street City State Zip

Home Phone _____ Male _____ Female _____

Current School _____ Date Entered _____

Church of Applicant _____ Denomination _____

Parent(s)/Guardian(s)

Relationship: _____

Relationship: _____

Marital Status: _____

Marital Status: _____

Mr. _____ Mrs. _____ Ms. _____ Miss _____

Mr. _____ Mrs. _____ Ms. _____ Miss _____

Rev. _____ Dr. _____ Other (specify) _____

Rev. _____ Dr. _____ Other (specify) _____

(Last) (First) (MI)

(Last) (First) (MI)

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Workplace: _____

Workplace: _____

Email: _____

Email: _____

Did family members attend Concordia Prep? Yes _____ No _____

If yes, names and years attended: _____

(Please see other side)

Check if appropriate: Parents divorced _____ Parents separated _____ Father deceased _____ Mother deceased _____

Has applicant been tested for or diagnosed with a learning disability? _____

If yes, do you wish to apply to the STAR (Student Aid and Resource) Program? _____

Has applicant been tested or diagnosed with: ADD _____ ADHD _____

Emergency contact (called after parent) _____ Phone _____

Address _____
Street City State Zip Relationship _____

Please describe your child: _____

Why are you considering Concordia Preparatory School for your child? _____

What organized activities does your child participate both inside and outside of school? _____

Names, addresses, and telephone for our family (_____ may) (_____ may not) be included in a parent-teacher directory.

Names and telephone numbers (_____ may) (_____ may not) be given for car pooling.

Photographs and recordings of the student named on this application (_____ may) (_____ may not) be used in school projects, programs, and promotional materials.

How did you hear about Concordia Prep School? _____

Signature _____ **Date** _____
Parent/Guardian

Non-Discrimination Policy

Concordia Preparatory School will not discriminate on the basis of race, color, sex, disability, or national or ethnic origin in the administration of its educational policies, admissions policies, and athletic and other school-administered programs and guarantees to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. Concordia Preparatory School will not discriminate on the basis of race, color, sex, age, disability, national origin or Vietnam Era Veteran status in the employment of the administrative, teaching, or custodial staffs necessary for the operation of the school.

Please return completed application and \$50 non-refundable application fee to:

Admissions
Concordia Preparatory School
1145 Concordia Drive
Towson, MD 21286

Office Use Only

Date Received _____

Check # _____

Check Date _____

Fee Paid _____