



1665 Highway 45 By-Pass  
Jackson, Tennessee 38305  
731-668-2525  
[www.stmarysschool.tn.org](http://www.stmarysschool.tn.org)

Address to: Kim Lemons, Director of Admissions

Kim.Lemons@stmarys.tn.org

Applications must include the following to be processed:

- A copy of the most recent report card AND a copy of the most recent standardized test scores
- Confidential Recommendation Form completed by current teacher, if applicable
- A copy of student's birth certificate
- Baptismal Certificate for all Catholics and the Contributing Catholic Verification Form
- A \$75.00 non-refundable interview/testing fee for the first child. \$55 for each additional sibling.

Student's Name \_\_\_\_\_  
Last First Preferred Male/Female

Grade for which you are applying \_\_\_\_\_ year \_\_\_\_\_ Date of Application \_\_\_\_\_  
Month / Day /Year

Street Address \_\_\_\_\_ City State Zip Code

Date of Birth \_\_\_\_\_ City/State of Birth Religion

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

If Catholic, registered member of \_\_\_\_\_ (Name of Parish)

**Sacramental Information for Catholic Applicants:**

Date of Baptism \_\_\_\_\_ Church \_\_\_\_\_ City and State

Date of First Reconciliation \_\_\_\_\_ Church \_\_\_\_\_ City and State

Date of First Communion \_\_\_\_\_ Church \_\_\_\_\_ City and State

Date of Confirmation \_\_\_\_\_ Church \_\_\_\_\_ City and State

Current School \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Has your child been dismissed, suspended, or asked to withdraw from any school? If yes, please explain.

Has your child been administered any diagnostic evaluations (educational or psychological)? Please list.

In relation to significant medical history, are you aware of any accommodations that your child may need to facilitate a smooth transition if accepted to St. Mary's School?

Extra-curricular interests:

Has student previously applied to St. Mary's School? \_\_\_ yes \_\_\_ no If yes, what year? \_\_\_\_\_  
 Has student ever attended St. Mary's School? \_\_\_ yes \_\_\_ no If yes, what years? \_\_\_\_\_  
 Has student ever repeated a grade? \_\_\_ yes \_\_\_ no If yes, what grade? \_\_\_\_\_

Is there additional information you would like to communicate concerning your child?

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Although we do our best to meet the needs of each student, we are not equipped to teach students with severe learning disabilities. In the event that we cannot meet your child's needs, we will notify you. Please supply any pertinent, past or present information that will help us determine how we can best serve your child.

**Mother's Information:**

Last Name	First Name	Maiden Name
Occupation	Business Name	Business Phone
Home Phone	Cell Phone	

St. Mary's School Alumnus? \_\_\_ Yes \_\_\_ No If so, what year? \_\_\_\_\_

Email Address:

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**Father's Information:**

Last Name	First Name	
Occupation	Business Name	Business Phone
Home Phone	Cell Phone	

St. Mary's School Alumnus? \_\_\_ Yes \_\_\_ No If so, what year? \_\_\_\_\_

Email Address:

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**Other Children in Family:**

<u>Name</u>	<u>Age</u>	<u>School Attending (if applicable)</u>

Is applicant living with both parents? \_\_\_ yes \_\_\_ no

If not, with whom does applicant live? \_\_\_\_\_ Relationship: \_\_\_\_\_

Would you like a Spanish interpreter present at the parent/student interview? \_\_\_ yes \_\_\_ no

Please note any relatives who have graduated from St. Mary's School:

<u>Name</u>	<u>Class Year</u>	<u>Relationship</u>

Signature of Parent or Guardian \_\_\_\_\_



## HOW DID YOU HEAR ABOUT ST. MARY'S SCHOOL?

Date: \_\_\_\_\_

\_\_\_\_ TV Ad      \_\_\_\_ Radio Ad      \_\_\_\_ Website      Bus Sign \_\_\_\_

\_\_\_\_ Phone Book      \_\_\_\_ SMS Website      \_\_\_\_ Postcard Mailing

\_\_\_\_ Ad in the \_\_\_\_\_  
What

\_\_\_\_ SMS family recommended the school to you

This form *must* accompany your application

### IF A ST. MARY'S SCHOOL FAMILY OR PERSON RECOMMENDED YOU TO THE SCHOOL PLEASE FILL OUT THE INFORMATION BELOW

The \_\_\_\_\_ family (list only one) has recommended me to St. Mary's  
School. Please specify relationship with the family.

\_\_\_\_ Neighbor      \_\_\_\_ Friend      \_\_\_\_ Co-worker      \_\_\_\_ Realtor  
\_\_\_\_ Relative      \_\_\_\_ Church member      \_\_\_\_ Other \_\_\_\_\_

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Signature of Family applying to St. Mary's School

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Signature: Director of Admissions

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Signature of Administrator

**Thank you for your cooperation! This information is very helpful to us!**