



Account # \_\_\_\_\_

# St. Thomas Episcopal School

1416 North Loop 1604 East  
San Antonio, Texas 78232

Phone (210)494-3509 Fax (210)494-0678

www.stthomaskids.com

For office use:  
Grade Level \_\_\_\_\_  
Fees Pd. \_\_\_\_\_ Ck. # \_\_\_\_\_  
Birth Certificate \_\_\_\_\_

St. Thomas Parish Mbr?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

## ELEMENTARY – Application for Admission – 2012-2013

(Please use blue or black ballpoint pen/Please print clearly)

Child's Legal Name \_\_\_\_\_ Prefers to be called \_\_\_\_\_

First Middle Last

Date of Birth \_\_\_\_\_  Male  Female Child's Social Security Number \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Ethnic Information (Optional)-requested by SAES  
 African American  Hispanic/American  Caucasian  
 Asian American  Other \_\_\_\_\_

### Grade Level:

Gift of Time (8-3pm)  Kindergarten  First  Second  
 Third  Fourth  Fifth

**PLUS (Optional):**  Early Morning Care (7:00-8:00 a.m.)  After School Care (3:00-6:00 p.m.)

Previous School attended: \_\_\_\_\_

### Parent/Guardian & Billing Information

Father – Full Name \_\_\_\_\_ Mother – Full Name \_\_\_\_\_

Address (if different from above) \_\_\_\_\_ Address (if different from above) \_\_\_\_\_

City/Zip \_\_\_\_\_ City/Zip \_\_\_\_\_

Home Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_

**Employment:** Business/Employer \_\_\_\_\_ **Employment:** Business/Employer \_\_\_\_\_

Position/Title \_\_\_\_\_ Position/Title \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_ Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Religion \_\_\_\_\_ Church home: \_\_\_\_\_

Parents are:  Married  Separated  Divorced  Mother Remarried  Father Remarried

Child living with:  Both Parents  Mother  Father  Other (specify) \_\_\_\_\_

Person responsible for financial obligations: \_\_\_\_\_

Present/Past Siblings Attending St. Thomas: \_\_\_\_\_ Class/Grade(s) \_\_\_\_\_

How did you hear about St. Thomas: \_\_\_\_\_

Please submit completed and signed APPLICATION FORM, Application fee (check payable to STES), copy of the Birth Certificate, and Academic Record Release Form.

\_\_\_\_\_  
Parent's Signature Date

\_\_\_\_\_  
Parent's Signature Date