

Application

Applicant's Name: _____
Last First Middle Preferred Name

Home Address: _____
Street City State Zip

Phone: _____ Grade Applying to: _____ Beginning Fall _____ Spring _____
Year Year

Present Grade: _____ Age: _____ Birth Date: _____ Birth Place: _____

Parent's Name: _____
Title Last First Maiden Preferred Name

Home Address: _____
Street City State Zip

Home Phone: _____ Business Phone: _____ Cell Phone: _____

Place of Employment: _____ Title: _____

Business Address: _____
Street City State Zip

Parent's Education: _____
High School College Graduate School

Parent's Email: _____

Parent's Name: _____
Title Last First Middle Preferred Name

Home Address: _____
Street City State Zip

Home Phone: _____ Business Phone: _____ Cell Phone: _____

Place of Employment: _____ Title: _____

Business Address: _____
Street City State Zip

Parent's Education: _____
High School College Graduate School

Parent's Email: _____

Step-parent or Guardian: _____
Title Last First Maiden Name

Home Address: _____
Street City State Zip

Home Phone: _____ Business Phone: _____ Cell Phone: _____

Place of Employment: _____ Title: _____

Business Address: _____
Street City State Zip

Step-parent's Education: _____
High School College Graduate School

Step-parent's Email: _____

Are both parents living? Yes No Married Separated Divorced
 Father Remarried Mother Remarried Widow/Widower

Applicant living with: Parents Mother Father Other (please specify) _____

If applicant's parents are divorced, which parent has legal responsibility for:

School Related Decisions _____ School Bills _____

Custody of Student _____ Receiving School Communications _____

Siblings:

Name Age Grade School

Name Age Grade School

Name Age Grade School

McGehee alumnae

Does the applicant have any relatives who attended McGehee School? Yes No

If yes, please give names, relationships and years attended:

Applicant's scholastic background

Current or most recent school:

Former school attended:

Name of School _____

Name of School _____

Grades _____ Dates _____

Grades _____ Dates _____

School Address _____

School Address _____

School Phone _____

School Phone _____

School Fax _____

School Fax _____

Has the applicant been suspended or asked to leave any school? Yes No

If yes, please explain:

Has the applicant ever toured the school? Yes No When? _____

Has your child ever applied to McGehee School? Yes No When? _____ For What Grade? _____

How did you hear about McGehee School? Friend or neighbor Advertisement (which one?) Other _____

Has the applicant been evaluated? Yes No When? _____ By Whom? _____

To what other school(s) are you applying? _____

Will you be applying for financial aid if offered admission to McGehee School? Yes No
(Your answer will not influence the Admission Committee's decision regarding your application.)

To process your application, a non-refundable fee of \$50.00 and a signed transcript release form must be submitted with this application.

Date

Signature of Parent or Legal Guardian

Transcript Release

Student: _____

The Admission Office of the Louise S. McGehee School requests the following information:

- Current and past report cards
- All standardized test scores
- Official transcript
- Recommendations from current teacher(s)
- Any other information pertinent to the above student

Thank you very much for your assistance. If you have any questions, please call the admissions office at 561-1224.

I/we hereby authorize the independent school indicated above to contact schools and other sources to obtain information to support this student's application. I/we will not seek access to confidential recommendation and evaluation materials before or after an admission decision is made. I/we release every person and institution from any and all liability resulting from or pertaining to the furnishing of records, documents, and other information provided to the independent school indicated above for that purpose. In order to complete the application process, I/we authorize release of the full record when transfer to the independent school indicated above occurs.

The Directors of Admission at all of the independent schools wish to help all parents make the best school decision for their child/children. Since families frequently apply to more than one independent school, the schools share testing information so that an individual child does not have to undergo repetitive testing. Test results will be shared with other schools at your request. Please make sure that you inform the schools for which you have made application what other independent schools to which you would like test results transferred.

I hereby authorize the release of the above information both now and at the end of the school year.

Date

Signature of Parent or Legal Guardian

Please return this application to: Admission Office, Louise S. McGehee School 2343 Prytania Street, New Orleans, LA 70130
Telephone: (504) 561-1224, Fax: (504) 566-9365, www.mcgeheeschool.com