

PROVIDENCE HALL APPLICATION FOR ADMISSION



Tell us about YOURSELF.
Just the basics on this page.

Applicant's Name _____

Applying for Grade # _____

Academic Year _____ - _____

This form is to be completed by you, the student. Please print clearly or type.

Name _____
Last First Middle

Preferred Name _____ Male Female

Home Address _____
Number Street Apartment Number

City State Zip Code

Home Telephone _____ Preferred Email _____

Date of Birth _____ | _____ | _____ Place of Birth _____ Native Language _____
Month Day Year City / State / Country

Are you a U.S. citizen? Yes No Social Security Number _____ | _____ | _____

Ethnicity White African American Hispanic Asian Pacific Is. Am. Indian Other

Religious Affiliation Protestant Roman Catholic Other Faith Tradition

Church / Parish / Place of Worship _____

Name of Current School _____

Type of School Public Independent Parochial Home School

School Address _____
Number Street

City State Zip Code

Head of School _____ School Telephone _____

Current Grade _____ Number of Years Attended Current School _____



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Now's your chance to tell us more about yourself: your **ACTIVITIES AND INTERESTS**, beginning with those that are most important to you. These may include athletics, music performance, theatre, visual and other arts, church related clubs and organizations, community service. Anything else? Don't be shy.

Would you like to attach a picture? It's optional.

ACTIVITIES AND INTERESTS

DATES OF PARTICIPATION

Please share with us any academic, co-curricular, or personal achievements of which you are especially proud.

Please describe a specific challenge you have faced recently. How did you respond and what did you learn from this experience?

I affirm that the responses to the above three questions are entirely my own work.

Applicant's Name (printed) _____

Applicant's Signature _____

Date _____



PROVIDENCE HALL APPLICATION FOR ADMISSION



This is for PARENTS. We are delighted that your son or daughter is applying for admission to Providence Hall. Please help us to know the student better. Not enough space? Feel free to attach another page (bragging allowed).

Parents are married separated father deceased mother deceased single parent

With whom does the student live? _____

Will the student be a candidate for tuition assistance? (Requests have no bearing on admissions decisions.) Yes No
If yes, a completed Application for Admission must be received prior to applying for tuition assistance.

FATHER OR MALE GUARDIAN

MOTHER OR FEMALE GUARDIAN

Name _____

Name _____

Home Address _____

Home Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Home Telephone _____

Home Telephone _____

Profession/Position _____

Profession/Position _____

Employer _____

Employer _____

Business Address _____

Business Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Business Telephone _____

Business Telephone _____

E-mail Address _____

E-mail Address _____

Please describe your son/daughter. What, if any, concerns do you have about his or her readiness for college preparatory schooling? Please be specific by citing strengths and/or challenges your son/daughter has faced.

Please tell us how you hope to be involved in the new school community of Providence Hall.



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Tell us about the student's EDUCATIONAL history.

Junior Highs and High Schools previously attended by the student:

Name of School _____ Dates Attended _____ | _____ | _____ Grade(s) _____
Month Day Year

School Address _____
Number Street

City State Zip Code

Name of School _____ Dates Attended _____ | _____ | _____ Grade(s) _____
Month Day Year

School Address _____
Number Street

City State Zip Code

Has the student ever been expelled, denied re-enrollment at a school, counseled not to return to a school, or been the subject of any major school disciplinary action? Yes No *If yes, please explain on a separate page.*

Is there any medical or other reason for which the student cannot participate fully in any normal school activities, including athletics or other co-curricular activities? Yes No *If yes, please explain on a separate page.*

Are there any special factors or conditions, including any special medications or allergies, affecting the student about which the school needs to be informed? Yes No *If yes, please explain on a separate page.*

Providence Hall admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admissions policies, tuition assistance programs, athletic or other school-administered programs, and in compliance with and to the extent required by Title IX of the Educational Amendments Acts of 1972 does not discriminate on the basis of sex.

Signature of Parent or Legal Guardian _____ Date _____ | _____ | _____
Month Day Year



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We're almost finished. Please request a letter of personal REFERENCE from an adult (not a family member) who knows you well in a non-academic setting. This person might be a family friend, scout leader, music instructor, youth leader, or your pastor. No pets please.

TO THE STUDENT: *Please print your name below and give this form and an envelope stamped and addressed to Providence Hall to your personal reference.*

Name _____
Last First Middle

TO THE REFERENCE WRITER: This student has applied for admission to Providence Hall, an independent college preparatory school in Santa Barbara in the Christian faith. Your letter of personal reference is vital to our process. Please state clearly in what context and for how long you have known the candidate. It would be most helpful if your letter addressed the student's strengths and potential for growth, his or her personality, character, and leadership qualities. Your candor and thoughtfulness are much appreciated. Please feel free to use a separate page.

Signature

Date

Mailing Address

Printed Name

E-Mail Address

Title

Telephone

