

# Independent Schools *of St. Louis*

The secondary schools listed on the inside of this application have worked together to develop the ISSL Secondary School Application. **The application should be completed once; only photocopies should be sent to the schools to which the student is applying. The same is true for the Transcript Release Form and the Common Recommendation Form. Please keep the original for your records.**

## STEPS FOR COMPLETING THE ISSL Secondary School Application:

### GET STARTED

Call each school to which you are applying:

- Ask if the school is accepting the ISSL Secondary School Application and if additional application materials are required.
- Check the application deadline and testing requirements.
- Schedule a visit and an interview.
- Verify how many recommendations are required and from whom.
- Please ask for and make a note of all application deadlines.

### SUBMIT A COMPLETED APPLICATION

- Complete Sections A & B.
- Make a photocopy for each school to which your child is applying.
- Mail your completed, photocopied application, along with the appropriate fee, to the admission office of each school to which you are applying. The addresses are listed on the inside cover of this packet.
- Keep a copy of everything you submit including the original copy of the ISSL Secondary School Application.

### REQUEST SCHOOL RECORDS AND RECOMMENDATIONS

- Check the boxes on Section C for each school to which you are applying.
- Complete Section C and the top of Section D.
- Give Sections C and D to your child's current school.

### APPLY FOR FINANCIAL AID

- If you wish to apply for financial aid, please check "yes" on Page 1 of Section A of the application. Each school to which you are applying will send you the necessary forms.

# Independent Schools of St. Louis

## ISSL Secondary School Application Participants

### **Barat Academy**

Coeducational; grades 9–12;  
day school; Catholic  
Michael Wade, Director of Admissions  
#1 Academy Place  
Dardenne Prairie, MO 63368  
Phone: (636) 300-9060  
Fax: (636) 300-9061  
E-mail: mawade@baratacademy.org  
Application fee: \$60

### **Chaminade College Preparatory School**

All boys; grades 6–12; day and  
resident school; Catholic  
Matthew Saxer, Director of Admissions  
425 S. Lindbergh Blvd.  
St. Louis, MO 63131-2799  
Phone: (314) 993-4400 X150  
Fax: (314) 993-5732  
E-mail: admissions@chaminade-stl.com  
Application fee: \$50 for day  
Application fee: \$150 for international

### **The College School**

Coeducational; grades Pre–8;  
day school; non-sectarian  
Adrienne Rusbarsky, Director of Admissions  
#1 Newport Place  
St. Louis, MO 63119  
Phone: (314) 962-9355  
Fax: (314) 962-5078  
E-mail: arusbarsky@thecollegeschool.org  
Application fee: \$100

### **Crossroads College Preparatory School**

Coeducational; grades 7–12;  
day school; non-sectarian  
Maggie Baisch, Director of Admissions  
500 DeBaliviere  
St. Louis, MO 63112  
Phone: (314) 367-8085  
Fax: (314) 367-9711  
E-mail: maggie@crossroadscollegeprep.org  
Application fee: \$40

### **The Fulton School at St. Albans**

Coeducational; grades PK-12;  
day school; non-sectarian  
Diane Loyd, Director of Admissions  
123 Schoolhouse Road  
P.O. Box 78  
St. Albans, MO 63073  
Phone: (636) 458-6688  
Fax: (636) 458-6660  
E-mail: dloyd@fultonschoolstalbans.org  
Application fee: \$50

### **Gateway Academy**

Coeducational; grades PK-8  
day school; Catholic  
Mary Ann Mueth, Director of Admissions  
17815 Wild Horse Creek Rd.  
Chesterfield, MO 63005  
Phone: (636) 519-9099  
Fax: (636) 449-1627  
E-mail: mmueth@gatewayacademy.org  
Application fee: \$50

### **John Burroughs School**

Coeducational; grades 7–12;  
day school; non-sectarian  
Caroline LaVigne, Director of Admissions  
755 South Price Road  
St. Louis, MO 63124  
Phone: (314) 993-4040  
Fax: (314) 567-2896  
E-mail: clavigne@jburroughs.org  
Application fee: \$40

### **Mary Institute & Saint Louis Country Day School**

Coeducational; grades JK–12;  
day school; non-sectarian  
Peggy Laramie, Director of Admissions  
101 North Warson Road  
St. Louis, MO 63124  
Phone: (314) 995-7367  
Fax: (314) 872-3257  
E-mail: admissions@micds.org  
Application fee: \$40

### **Missouri Military Academy**

All boys; grades 6-12;  
Resident school, non-sectarian  
Roger Hill, Director of Admissions  
204 Grand Avenue  
Mexico, MO 65265  
Phone: 1-888-564-6662  
Fax: (573) 581-0081  
E-mail: info@mma.mexico.mo.us  
Application fee: \$100

### **Saint Louis Priory School**

All boys; grades 7–12;  
day school; Catholic  
Tom Mulvihill, Director of Admission  
500 South Mason Road  
St. Louis, MO 63141-8500  
Phone: (314) 434-3690, #101  
Fax: (314) 576-7088  
E-mail: admissions@priory.org  
Application fee: \$40

### **Thomas Jefferson School**

Coeducational; grades 7–12;  
day, five-day boarding, and  
full-time boarding school; non-sectarian  
Kenneth Colston, Co-Director of Admissions  
Jane Roth, Co-Director of Admissions  
4100 South Lindbergh Boulevard  
St. Louis, MO 63127  
Phone: (314) 843-4151  
Fax: (314) 843-3527  
E-mail: admissions@tjs.org  
Application fee: \$40 for domestic  
Application fee: \$100 for international

### **Villa Duchesne and Oak Hill School**

All girls; grades 7-12;  
Coeducational; JK-6  
day school; Catholic  
Mary Stevens, Director of Admissions  
801 South Spoeede Road  
St. Louis, MO 63131  
Phone: (314) 810-3451  
Fax: (314) 432-0199  
E-mail: mstevens@vdoh.org  
Application fee: \$40

### **Visitation Academy**

All girls; grades 1-12;  
Coeducational Montessori; 2 yrs.-K  
day school; Catholic  
Ashley Giljum, Director of Admissions  
3020 North Ballas Road  
St. Louis, MO 63131  
Phone: (314) 625-9103  
Fax: (314) 432-7210  
E-mail: admissions@visitationacademy.org  
Application fee: \$75

### **Westminster Christian Academy**

Coeducational; grades 7–12;  
day school; Christian  
Peggy Johnson, Director of Admissions  
10900 Ladue Road  
St. Louis, MO 63141  
Phone: (314) 997-2900  
Fax: (314) 997-2903  
E-mail: pjohnson@wcastl.org  
Application fee: \$50

### **Whitfield School**

Coeducational; grades 6–12;  
day school; non-sectarian  
Cynthia Crum Alverson,  
Director of Admission  
175 South Mason Road  
St. Louis, MO 63141  
Phone: (314) 434-5141  
Fax: (314) 434-6193  
E-mail: cyndy.alverson@whitfieldschool.org  
Application and testing fee: \$75

# Independent Schools of St. Louis

## ISSL Secondary School Application Section A (Parent)

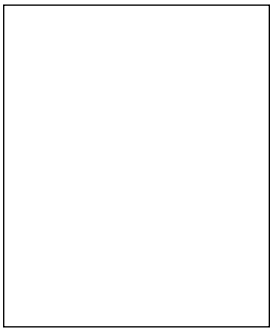


Photo (optional)

Parents or guardians of the applicant are asked to complete Section A. Please print or type.  
Applicants are asked to complete Section B.

APPLICANT INFORMATION

Applicant's legal name \_\_\_\_\_  
Last First Middle

Female  Male Preferred name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth (month/day/year) \_\_\_\_\_ Place of Birth \_\_\_\_\_

Applying for grade \_\_\_\_\_ Month/Year \_\_\_\_\_ Current grade \_\_\_\_\_

Citizenship:  US  Other (Please specify): \_\_\_\_\_ Language(s) spoken at home (other than English): \_\_\_\_\_

Mailing address \_\_\_\_\_  
Street City State Zip

Home telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Student E-mail \_\_\_\_\_

Will the applicant be requesting financial aid information?  Yes  No

*The following question is OPTIONAL and is used for statistical purposes only. Please check all that apply.*

- African American   
  Caucasian   
  Latino/Hispanic American   
  Pacific Islander American  
 Asian American   
  Native American   
  Middle Eastern American   
  Other (please specify) \_\_\_\_\_

For applicants applying to religiously affiliated schools: (Optional for other schools)

Religion of: Student: \_\_\_\_\_ Parent(s): \_\_\_\_\_

Place of worship: \_\_\_\_\_

Current school \_\_\_\_\_ School district in which applicant resides \_\_\_\_\_

School address \_\_\_\_\_  
Street Address City State Zip

School Telephone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Principal/Head \_\_\_\_\_

Dates of attendance \_\_\_\_\_

Other school(s) previously attended:

Name	Address	Telephone	Dates of Attendance

Name	Address	Telephone	Dates of Attendance

**FAMILY INFORMATION**

Student resides with (check all that apply): Parents married Parents separated Parents divorced

Father Mother Stepfather Stepmother Other (please specify) \_\_\_\_\_

If divorced or separated, who has legal custody of the Child? Father Mother Both Other (please specify) \_\_\_\_\_

If divorced or separated, who has physical custody of the Child? Father Mother Both Other (please specify) \_\_\_\_\_

Correspondence should be sent to: Both parents Father Mother Other (please specify) \_\_\_\_\_

**Name of parent or guardian:** Deceased

Dr. Mr. Mrs. Ms. Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
First Middle Last

Maiden name: \_\_\_\_\_

Preferred name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Home address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Home telephone: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Position: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Telephone:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

**If applicable, name of stepparent:**

Dr. Mr. Mrs. Ms. Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
First Middle Last

Maiden name: \_\_\_\_\_

Preferred name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Home address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Home telephone: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Position: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Telephone:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

**Name of parent or guardian:** Deceased

Dr. Mr. Mrs. Ms. Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
First Middle Last

Maiden name: \_\_\_\_\_

Preferred name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Home address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Home telephone: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Position: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Telephone:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

**If applicable, name of stepparent:**

Dr. Mr. Mrs. Ms. Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
First Middle Last

Maiden name: \_\_\_\_\_

Preferred name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Home address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Home telephone: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Position: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Telephone:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

Please list names of applicant's brothers and sisters, their ages, schools (colleges) they now attend, and their grades/years in school.

Name	Age	School	Grade/Year

If the applicant has had any relatives who have graduated from the school(s) to which the student is applying, or if any relatives currently attend, please list their names (include maiden names where applicable), relationship to applicant and the years they attended. *You are welcome to attach applicable legacy information for each school on separate pieces of paper.*

Name	Relationship to Applicant	School	Years attended

If there are circumstances which have affected or may affect the applicant's academic performance, participation in athletics, or attendance in school, please describe (e.g., frequent moves/change of school, separation/loss of a significant person in the family, disciplinary action, illness, learning difference, skipping or repeating a grade).

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If there is any additional information you believe would be helpful for the admission committee(s) to review, please describe.

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STATEMENT OF CONFIDENTIALITY:

*It is the policy of all members of the Independent Schools of St. Louis that all information received regarding a candidate's application for admission will be treated with complete confidentiality. Only authorized school personnel have access to this information and then only to the extent that the information is relevant to admission and placement decisions. Information received within the scope of this policy is not disclosed to the applicant or to the applicant's family.*

I/We hereby state that the information contained herein is true and complete. I/We have not knowingly omitted any pertinent information regarding my/our child's academic, medical or behavioral history.

Signature of parent(s)/guardian(s):

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Signature Date

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Signature Date



# Independent Schools of St. Louis

## ISSL Secondary School Application Section B (Student)

This section is to be completed by the applicant.

Print full name \_\_\_\_\_  
First Middle Last

Preferred Name \_\_\_\_\_  Female  Male Applying to grade \_\_\_\_\_

Name of present school: \_\_\_\_\_

*Please write about your involvement in any of the activities listed below, being as specific as possible. Although you are not expected to be involved in all of the areas listed below, we want you to have the chance to write about those in which you have taken an active interest.*

Visual Arts \_\_\_\_\_

Athletics \_\_\_\_\_

Community Service/Family Responsibilities \_\_\_\_\_

Drama/Literary/Music \_\_\_\_\_

Math/Science \_\_\_\_\_

Hobbies \_\_\_\_\_

Other Activities \_\_\_\_\_



# Independent Schools

of St. Louis

## ISSL Secondary School Application Section C (School)

**Check the box to the left of each school to which your child is applying and complete the Transcript Release Form on the reverse side. Give this completed form to your child's school, along with the Common Recommendation Form, on which you supplied the applicant's name and current school.**

- Barat Academy**  
Michael Wade, Director of Admissions  
#1 Academy Place, Dardenne Prairie, MO 63368  
Phone: (636) 300-9060  
Fax: (636) 300-9061  
Application Deadline: November 11, 2009
- Chaminade College Preparatory School**  
Matthew Saxer, Director of Admissions  
425 S. Lindbergh Blvd., St. Louis, MO 63131-2799  
Phone: (314) 993-4400 X150  
Fax: (314) 993-5732  
Application Deadline: December 15, 2009 (HS)  
Application Deadline: January 22, 2010 (MS)
- The College School**  
Adrienne Rusbarsky, Director of Admissions  
#1 Newport Place, St. Louis, MO 63119  
Phone: (314) 962-9355  
Fax: (314) 962-5078  
Application Deadline: February 3, 2010
- Crossroads College Preparatory School**  
Maggie Baisch, Director of Admissions  
500 DeBaliviere, St. Louis, MO 63112  
Phone: (314) 367-8085  
Fax: (314) 367-9711  
Application Deadline: January 22, 2010
- The Fulton School at St. Albans**  
Diane Loyd, Director of Admissions  
123 Schoolhouse Road, P.O. Box 78, St. Albans, MO 63073  
Phone: (636) 458-6688  
Fax: (636) 458-6660  
Application Deadline: Rolling admissions
- Gateway Academy**  
Mary Ann Mueth, Director of Admissions  
17815 Wild Horse Creek Rd., Chesterfield, MO 63005  
Phone: (636) 519-9099  
Fax: (636) 449-1627  
Application Deadline: Rolling admissions
- John Burroughs School**  
Caroline LaVigne, Director of Admissions  
755 South Price Road, St. Louis, MO 63124  
Phone: (314) 993-4040  
Fax: (314) 567-2896  
Application Deadline: January 22, 2010
- Mary Institute & Saint Louis Country Day School**  
Peggy Laramie, Director of Admissions  
101 North Warson Road, St. Louis, MO 63124  
Phone: (314) 995-7367  
Fax: (314) 872-3257  
Application Deadline: January 22, 2010 (JK-12th)  
Application Deadline: January 11, 2010 (9th)
- Missouri Military Academy**  
Roger Hill, Director of Admissions  
204 Grand Avenue, Mexico, MO 65265  
Phone: 1-888-564-6662  
Fax: (573) 581-0081  
Application Deadline: Rolling admissions
- The Saint Louis Priory School**  
Tom Mulvihill, Director of Admissions  
500 South Mason Road, St. Louis, MO 63141-8500  
Phone: (314) 434-3690, #101  
Fax: (314) 576-7088  
Application Deadline: January 22, 2010
- Thomas Jefferson School**  
Kenneth Colston, Co-Director of Admissions  
Jane Roth, Co-Director of Admissions  
4100 South Lindbergh Boulevard, St. Louis, MO 63127  
Phone: (314) 843-4151  
Fax: (314) 843-4152  
Application Deadline: December 11, 2010 (early decision)  
Application Deadline: February 19, 2010 (regular decision)
- Villa Duchesne and Oak Hill School**  
Mary Stevens, Director of Admissions  
801 S. Spoede Road, St. Louis, MO 63131  
Phone: (314) 810-3451  
Fax: (314) 432-0199  
Application Deadline: November 11, 2009 (9th)  
Application Deadline: January 22, 2010
- Visitation Academy**  
Ashley Giljum Director of Admissions  
3020 North Ballas Road, St. Louis, MO 63131  
Phone: (314) 625-9103  
Fax: (314) 432-7210  
Application Deadline: November 11, 2009 (9th)  
Application Deadline: January 22, 2010
- Westminster Christian Academy**  
Peggy Johnson, Director of Admissions  
10900 Ladue Road, St. Louis, MO 63141  
Phone: (314) 997-2900  
Fax: (314) 997-2903  
Application Deadline: January 22, 2010
- Whitfield School**  
Cynthia Crum Alverson, Director of Admission  
175 South Mason Road, St. Louis, MO 63141  
Phone: (314) 434-5141  
Fax: (314) 434-6193  
Application Deadline: January 15, 2010 (early decision)  
Application Deadline: January 15, 2010 (regular decision)

# Transcript Release Form (Section C)

Parents: Please give this form to your child's current school. Records must be sent **directly** from the current school.

I/We authorize the release of my/our child's:

- grades from the past two school years and the current school year
- aptitude and achievement test scores
- interpretation of grading scales
- psychological and special needs testing results
- attendance and disciplinary records
- immunization and medical records
- current teacher recommendation

If accepted, I/we authorize release of the full record when transfer occurs.

I/we authorize the school(s) checked to contact schools and other sources to obtain information relative to my/our child's application. I/We will not seek access to confidential recommendation and evaluation materials before or after the admission decision is made.

Applicant's full name: \_\_\_\_\_  
First Middle Last

Applying for grade: \_\_\_\_\_ Enrolling: \_\_\_\_\_ DOB: \_\_\_\_\_  
Month/Year Month/Day/Year

Current School: \_\_\_\_\_

School Address: \_\_\_\_\_  
Street Address City State Zip

School phone: ( ) \_\_\_\_\_ School fax: ( ) \_\_\_\_\_

### STATEMENT OF CONFIDENTIALITY:

It is the policy of all members of the Independent Schools of St. Louis that all information received regarding a candidate's application for admission will be treated with complete confidentiality. Only authorized school personnel have access to this information and then only to the extent that the information is relevant to admission and placement decisions. Information received within the scope of this policy is not disclosed to the applicant or to the applicant's family.

Signature(s) of parent(s)/guardian(s):

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date



Common Recommendation Form for Children Applying to Grades 5 through 12
Section D

Parents: Please submit this form to one of your child's current teachers. Include with each recommendation, an addressed and stamped envelope for each school to which you would like the completed recommendation sent.

Teachers: Please keep the original and send copy(ies) directly to the school(s) to which the student is applying. This form may be duplicated if more than one teacher is recommending.

Applicant's full name: First Middle Last

Applicant's current school: Current grade:

The student named above is applying for admission to one or more secondary school members of the Independent Schools of St. Louis. As part of the admission process, we appreciate your cooperation in completing this form. This evaluation and its contents will be used only in connection with the admission decision by the ISSL schools using the ISSL Secondary School Application. ISSL member schools will not share reasons for an applicant being denied admission.

If you wish to discuss this in person rather than completing this form, please check the box below, sign and return this form with your telephone number(s). A representative from the admission office will contact you shortly.

I would like to discuss the applicant personally rather than completing this form. Best time: Contact #:

Name of person completing this form: Print Name

My relationship with this student has been that of (check all that apply):

- School Counselor School Administrator
Teacher (please specify subjects)
Other (please specify)

I have known this student for: Years Months Daytime phone: ( )

Signature Date

The items that follow ask for your sense of this student's relationship within the school community, emotional and social growth and intellectual development. Your insight will help us to know this child. We understand the difficulty in evaluating a student, and we are aware that children are constantly growing, changing and developing. The information you provide will be kept in strictest confidence and used only by the admission committee.

What are the first words that come to mind when describing this student?

What are the student's special interests or abilities?

We would appreciate your comments and observations concerning the strengths, weaknesses, learning style, health, behavior or special needs of this student. Feel free to attach an additional sheet of paper if necessary.

Please comment on the parents' support of their child's learning and their cooperation with the school.

Does this school have a program for special needs students (gifted, learning disabled, etc.)? Yes No

If yes, is this student involved in a program? Yes No Name of program: \_\_\_\_\_

For how long has this student been involved? \_\_\_\_\_ Years \_\_\_\_\_ Months

Has the applicant ever been suspended, dismissed, requested to withdraw or otherwise penalized or disciplined for any reason? Yes No

If yes, please state the nature of the action taken and describe the circumstances relating to the action. Please provide the names of the teachers or administrators involved.

*Please rate this student compared to other students you have taught on the scale below as it relates to each category listed. (This form may be duplicated if more than one teacher wishes to complete this scale.)*

**Personal Qualities**

	Outstanding	Above Average	Average	Fair	Needs Improvement
Work ethic					
Conduct					
Consideration for others					
Relationships with peers					
Relationships with adults					
Emotional maturity					
Self-confidence					
Sense of humor					
Honesty					
Sense of responsibility					
Leadership skills					

**Academic Qualities**

	Outstanding	Above Average	Average	Fair	Needs Improvement
Motivation to learn					
Intellectual curiosity					
Ability to work in a group					
Ability to work independently					
Organizational skills					
Work habits					
Creativity					
Class preparation					
Class participation					
Academic promise					
Academic achievement					



**Independent  
Schools**  
*of St. Louis*

**For additional information about all  
Independent Schools of St. Louis members,  
please contact:**

Genie Newport Guilliams, Executive Director  
Independent Schools of St. Louis  
425 S. Lindbergh Boulevard  
St. Louis, MO 63131  
(314) 567-9229  
[www.independentschools.org](http://www.independentschools.org)