



Application Checklist for US Students

The following are needed by SPLHS for consideration of an application for enrollment:

- The student must submit a completed "Application for Admission" form.
 - Student's transcript(s) must be submitted. Any pertinent test results should also be submitted. Incoming freshmen send 7th and 8th grade reports. Transfer students submit a transcript that includes all course work completed in high school.
 - Complete the Transcript/Records Request Form
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- Two (2) photographs of the student are required. Preferably one picture will be of the student alone and one of the student with his or her family. Please identify each member of the group.
 - The student must submit the "Student Autobiographical Statement" form and his or her parents should submit the "Parent Statement" form in English.
- A nonrefundable US application fee is due with your application for admission. This fee is \$50.00 by the end of October. \$100.00 from November through the end of June, and \$150.00 thereafter.
- Once a student's application has been accepted, the following are needed by SPLHS before they can begin classes.**
- Requests to be considered for grants and scholarships should be submitted as soon as possible.
 - All medical shots must be current. Contact SPLHS for a complete list.

All other required forms included in your Saint Paul acceptance packet. Students not submitting all required forms including, but not limited to, shot records, permission forms, computer use agreement and handbook support statement signed by parents, will be assessed a late fee of \$100.00. Students will not attend class until the missing forms are filed and the late fee has been paid.

Direct all completed forms and correspondence to:

Admissions
Saint Paul Lutheran High School
P.O. Box 719
Concordia, MO 64020

Phone: 660-463-2238, ext. 232

Fax: 660-463-7621

E-mail: blemmons@splhs.org

Web: www.splhs.org



Application for Admission - US Students

1. Identifying and Contact Information -- Please Print Clearly

TODAY'S DATE

LAST NAME (FAMILY) FIRST (GIVEN) MIDDLE

() _____
HOME PHONE NUMBER SOCIAL SECURITY NUMBER

DATE OF BIRTH (MONTH/DATE/YEAR) PLACE OF BIRTH (CITY AND STATE) SEX: MALE FEMALE

CURRENT MAILING ADDRESS: STREET AND NUMBER

CITY, STATE ZIP

2. Family Information

A. FATHER OR LEGAL GUARDIAN () BUSINESS PHONE () FAX NUMBER PREFERRED HOURS TO CALL

E-MAIL ADDRESS () CELL PHONE NUMBER

B. MOTHER OR LEGAL GUARDIAN () BUSINESS PHONE () FAX NUMBER PREFERRED HOURS TO CALL

E-MAIL ADDRESS () CELL PHONE NUMBER

NAMES OF THOSE THE APPLICANT CURRENTLY LIVES WITH AND THE STUDENT'S RELATIONSHIP TO HIM OR HER (SISTER, GRANDFATHER, STEP-MOM, ETC.):

3. Religious Affiliation and Congregation

NAME OF HOME CONGREGATION ADDRESS

NAME OF PASTOR () CHURCH PHONE NUMBER

RELIGIOUS AFFILIATION (CHECK ONE) : LCMS (SPECIFY DISTRICT: _____)

OTHER (SPECIFY DENOMINATION: _____) NONE

4. Academic, Housing, and Career Plans

APPLICANT TO BE CONSIDERED FOR THE FOLLOWING CLASS (CHECK ONE): FRESHMAN SOPHOMORE JUNIOR SENIOR

DATE APPLICANT PLANS TO ENTER

STUDENT HOUSING (CHECK ONE) YES NO
(ALL STUDENTS NOT LIVING WITH THEIR PARENTS OR GUARDIANS ARE REQUIRED TO LIVE IN CAMPUS HOUSING)

CAREER GOALS -- THE APPLICANT PLANS TO: (CHECK ONE):

ENTER PUBLIC MINISTRY IN THE LUTHERAN CHURCH-MISSOURI SYNOD AS A (CIRCLE ONE):

Deaconess - Director of Christian Education - Director of Christian Outreach - Director of Evangelism (Missionary) - Pastor - Social Worker - Teacher

USE MY GOD-GIVEN TALENTS TO PREPARE FOR A CAREER IN: _____

Ph 660-463-2238

www.splhs.org

Fax: 660-463-7621

5. Past School Information

NAME OF SCHOOL LAST ATTENDED	NAME OF SCHOOL DISTRICT (IF A MISSOURI RESIDENT)
SCHOOL ADDRESS	() SCHOOL PHONE NUMBER
PRINCIPAL'S NAME	() PHONE NUMBER
SCHOOL COUNSELOR'S NAME	() PHONE NUMBER

PREVIOUSLY ATTENDED SCHOOLS:

NAME	ADDRESS	GRADES COMPLETED	DATES ATTENDED	PRINCIPAL'S NAME
NAME	ADDRESS	GRADES COMPLETED	DATES ATTENDED	PRINCIPAL'S NAME
NAME	ADDRESS	GRADES COMPLETED	DATES ATTENDED	PRINCIPAL'S NAME

6. I Agree to the Following

I understand the mission of Saint Paul and wish to enroll as a student. I declare that the information entered above and in support of this application is all true to the best of my knowledge.

Our mission:

The mission of Saint Paul Lutheran High School is to provide curricular and co-curricular experiences in a Christian environment that will equip students for joyful, faithful service to Christ and His world.

Applicant signature: _____ Date: _____

Parent/legal guardian signature(s): _____ Date: _____

_____ Date: _____

Saint Paul Lutheran High School does not discriminate on the basis of race, color, or national or ethnic origin in the administration of its admission and education policies, financial aid programs, athletic programs, and other administered activities.

When returning the application, please also enclose:

- ___ Two recent photos
- ___ Copy of applicant's grades/transcripts
- ___ The appropriate application fee
- ___ Applicant's autobiographical statement
- ___ Parent's statement
- ___ Any pertinent test results

Send this application and all supporting materials to:

Admissions:
 Saint Paul Lutheran High School
 PO Box 719
 Concordia, MO 64020-0719

Questions? Please give us a call:
 Phone 660-463-2238 (ext. 232)
 Fax 660-463-7621



Student Autobiographical Statement

On a separate paper, type or write clearly (single spaced) a letter of at least 400 words that will introduce you to Saint Paul Lutheran High School. We are interested in knowing as much as possible about you. The following are some suggested topics to cover. Please feel free to include anything else that you would like to tell us. Attach this signed cover sheet to your autobiography

- √ Describe your relationship with members of your family and with your friends.
- √ Describe your activities and responsibilities at home, school, and in your community.
- √ Describe the sports, music, drama, and academic areas of interest you currently are involved in and indicate high school years.
- √ Describe your relationship with God.

Signature of Student

Date



Parent Statement

Please use this sheet to type or print a letter to Saint Paul Lutheran High School. Describe your child's personality, interests, and relationships. It will be helpful to your child's future at Saint Paul if you would include the following:

- √ Your child's past home and school environments, including any experiences that have been important to the development of your child's character.
- √ Ability to relate to peers and adults.
- √ Address what you believe to be a good environment for your child and why you think Saint Paul would be a good choice for him or her.

Signature of Parent or Guardian

Date



Transcript/Records Request Form

Attention: Registrar's - Counselor's Office.

TO: _____
(School from which transcript requested:)

ADDRESS - NUMBER AND STREET CITY STATE ZIP

FR: _____
STUDENT NAME - LAST FIRST (GIVEN) MIDDLE

ADDRESS: STREET CITY STATE ZIP

(NAME ON TRANSCRIPT IF DIFFERENT THAN ABOVE:)

SOCIAL SECURITY NUMBER (IF APPLICABLE) DATE OF BIRTH

.....
DATES OF ENROLLMENT: _____ - _____
FROM (MONTH/YEAR) TO (MONTH/YEAR)

Please send one (1) official transcript, immunizations, current class schedule, discipline and attendance reports, copies of tests results and any IEP plans to:

Saint Paul Lutheran High School
Saint Paul Lutheran High School
P.O. Box 719
Concordia, MO 64020 USA

STUDENT SIGNATURE DATE

PARENT / GUARDIAN SIGNATURE DATE

BILL LEMMONS, DIRECTOR OF RECRUITMENT DATE
SAINT PAUL LUTHERAN HIGH, CONCORDIA, MO



2010-2011 TUITION AND FEES

Required Fees	RESIDENT STUDENT	COMMUTING STUDENT
Tuition & Fees	\$12,900.00	\$8,740.00

ADDITIONAL FEES AS APPLICABLE

P.E. Uniform Fee	\$ 25.00
P.E. Gym Padlock	5.00
Art Course Fee (Per Semester—Per Course).....	20.00
Chemistry Class Fee	10.00
Biology Class Fee	10.00
Advanced Biology Class Fee	15.00
Motor Vehicle Registration	25.00
College Course Tuition ITV (Per Credit Hour)	150.00
College Course Tuition - on campus course (per credit hour).....	100.00
College Application Fee.....	25.00
Finance Charge (Non-Annual/Semester Payments)	100.00
Graduation Fee.....	50.00
Transcript Cost	3.00
Matriculation Fee*	25.00
Music Course Fee (For Each Course).....	20.00
Private Room— Additional Charge Per Semester	450.00
Student-Owned Refrigerator Usage Fee Per Semester	20.00
Student-Owned Air Conditioner Usage Fee Per Semester**	40.00
Airport Transportation –One Person	50.00
Airport Transportation –Two People	25.00
Airport Transportation –Three Or More	20.00
Bus Fee To Games/Shopping	3.00
Bus Fee Over 60 Miles Away	4.00

Returning students not paying their \$50.00 non-refundable deposit by May 14, 2010 will be assessed a \$25.00 late fee. The deposit is credited to the student's account; the late fee is not.

*This fee is charged only at the time of first enrollment.

**Air conditioner will be taken out of the windows by September 30 of each year and may be replaced on April 15 or each year. A resident hall supervisor or someone from maintenance is to be present when the air conditioner is installed. Student provides an air conditioner that is no larger than 5200 BTU. One air conditioner per room.

REFUND POLICY

- No refund is given on tuition after the first three weeks of the semester.
- Rooms are rented by the semester with no refund for unused portion.
- Board is charged at \$150 per week for less than a semester of attendance.
- No refund is given on other fees.