

St. Michael's Country Day School admits students without regard to race, religion, color, gender or national origin. Admission decisions are made on academic and personal qualifications as well as available openings per grade level.

Please list any other friends or relatives you would like us to add to our mailing list:

Admission Office
St. Michael's Country Day School
180 Rhode Island Avenue
Newport, RI 02840
admission@smcnds.org
(401) 849-5970 ext. 302
(401) 849-7890 FAX

Please return this form, a current photo of the student (optional) and a \$50.00 application fee to:

To complete your application

The admission process includes the following:

1. A completed application form and fee.
2. A two-day-long student visit for K-8, a half-day visit for PK; and a screening morning visit for preschoolers.
3. St. Michael's Admission testing.
4. Recommendation forms completed by the student's current teacher.
5. Transcripts from the current school.
6. Copies of any testing.



ST. MICHAEL'S
Country Day School
1938 • Newport, Rhode Island



Preschool through Grade Eight
Coed | Independent | Nonsectarian

Application Information and Forms

180 Rhode Island Avenue · Newport, Rhode Island 02840
T: 401-849-5970 · F: 401-849-7890
www.stmichaelscountryday.org



APPLICATION FOR ADMISSION

Applicant Information



Applying for Grade _____ for the school year _____

Applicant's name _____ (last) _____ (first) _____ (middle)

Date of birth _____ Male/Female Preferred Name _____ SS# _____

Home Address _____

Phone _____ E-mail _____

Applicant's Religious Affiliation _____ (optional)

Applicant's Race and/or Ethnicity _____ (optional)

Current school _____ Current grade _____

School contact person _____ Phone _____

Address _____

Are there any physical or emotional conditions of which St. Michael's should be aware? Yes/No

If yes, please explain _____

Has the applicant ever had a psychological or educational evaluation? (optional) Yes/No

If yes, when? _____

Are you considering applying for financial aid? Yes/No

Applicant lives with: Both parents Parent 1 Parent 2

If parents are divorced or separated, person legally responsible for the student:

Both parents Parent 1 Parent 2

Address if different from above _____

Person responsible for tuition _____

Parent Information

PARENT 1

Full Name _____

Preferred Name _____

Occupation _____

Business Address _____

Phone # _____ E-mail _____ Fax _____

PARENT 2

Full Name _____

Preferred Name _____

Occupation _____

Business Address _____

Phone # _____ E-mail _____ Fax _____

Names and ages of siblings and schools attending: _____

Names and contact information for maternal grandparents: _____

Names and contact information for paternal grandparents: _____

Please indicate the names of any friends or relatives who have attended St. Michael's _____

Signature of Parent or Guardian _____ Date _____