



January, 2008

Dear Parents:

Thank you for your interest in Lake Catholic High School. Enclosed are the forms which must be completed and returned in order to begin the process for admission.

The application for admission to Lake Catholic High School includes two forms. The front and back side of the ***Student Application*** is to be completed by the student and signed by the parent. When completed and signed, please send the ***Student Application*** to my attention at the address listed on the back side of the application.

The second form included in the mailing is the ***Student Record Request***, which will assist us in gathering pertinent academic information about the applicant. Complete the top portion and sign on the designated line to authorize your child's school to release the requested materials. When you have completed your portion of the form, please take or mail it to the student's current school. A school official will prepare and mail the requested materials to us.

Please note that we will not consider an admissions request or make a determination of acceptance until all materials- forms and school records - have been received. Applicants are evaluated on their prior academic progress, standardized test scores, attendance, and essay.

If you have any questions regarding the admissions process, please feel free to call me at (440) 951-0077 Ext. 234. I look forward to working with you during this exciting time.

Sincerely,

Mrs. Mary Jo Elber
Admissions Director

**LAKE
CATHOLIC**

6733 Reynolds Road
Mentor, Ohio 44060



STUDENT APPLICATION

Name of Student _____ Male Female
(please print) Last First Middle

Home Address _____
Number and Street City Zip Code

Telephone Number _____ Date of Birth _____
Month Day Year

School Currently Attending _____ City _____

Current Grade in School: 8th 9th 10th 11th 12th

Student is Applying for Admission to Lake Catholic for the Academic Year: 20____-20____

Name of Parish/Church to Which Student Belongs _____

Religion: Catholic Other (please specify) _____

Note: Students who attend Lake Catholic High School are not required to be Catholic. However, all students are required to earn at least four religion credits, attend school religious services, and participate in annual class retreats.

List any brothers and/or sisters who are currently attending Lake Catholic High School:

Name of Sibling	Current Grade

List siblings, parents and/or grandparents who graduated from Lake Catholic High School:

Name of Relative	Relationship	Year of Graduation

Father's Name _____ Mother's Name _____

With Whom Does the Student Live: Both Parents Father Mother Other _____
(please specify)

TO BE COMPLETED BY THE STUDENT APPLICANT:

In the space provided, write a short paragraph describing your reasons for applying to Lake Catholic High School.

List any extracurricular activities in which you are presently involved:

Academic Clubs _____

Service Clubs/Projects _____

Sports _____

Parish/Church Involvement _____

Other _____

Student Signature _____	Date _____
Parent/Guardian Signature _____	Date _____

Return completed application to: Admissions Office
Lake Catholic High School
6733 Reynolds Road
Mentor, OH 44060

Note: You will also need to complete the enclosed Student Record Request form and return it to your current school principal.

**LAKE
CATHOLIC**

6733 Reynolds Road
Mentor, Ohio 44060



STUDENT RECORD REQUEST

Name of Student _____ Male Female
(please print) Last First Middle

Home Address _____
Number and Street City Zip Code

Telephone Number _____ Date of Birth _____
Month Day Year

School Currently Attending _____ City _____

Current Grade in School: 8th 9th 10th 11th 12th

Student is Applying for Admission to Lake Catholic for the Academic Year: 20____-20____

I authorize release of the records requested below:

Parent/Guardian Signature _____ Date _____

To the school official: The above-named student is being considered for admission to Lake Catholic High School. Please forward the following information to the address shown below:

List siblings, parents and/or grandparents who graduated from Lake Catholic High School:

- Academic record/transcript
- Most recent report card
- Record of attendance
- Standardized test scores (Iowa, CAT, etc.)
- Ohio Graduation Test scores, if applicable
- Individualized Education Plan (IEP), if applicable

Name of School Official _____ Telephone _____

School Official's Signature _____ Date _____

Return this form and student records to: Admissions Office
Lake Catholic High School
6733 Reynolds Road
Mentor, OH 44060