



***Student's Academic Information***

School(s) Attended:

School Name

Address

Attendance Date

---

---

---

Name of most recent teacher (grade 5) or guidance counselor (grade 6-12) and their contact number and/or email address: \_\_\_\_\_

Does the student have a diagnosed physical or learning disability? If so, please explain. Include copies of any psychological, medical or educational evaluations that have been done.

---

---

Does the student have any academic difficulties? If so, please explain. \_\_\_\_\_

---

---

Has the student missed school because of any serious injuries or operations, or is there any health condition that the school should be aware of? \_\_\_\_\_

---

---

Is the student currently taking any medication? Please list names and frequency of doses. \_\_\_\_\_

---

---

Has the student ever received any professional counseling or evaluation? If so, please explain. \_\_\_\_\_

---

---

Will you agree to further testing and/or tutoring as recommended by school director? \_\_\_\_\_

---

---

Has the student ever been suspended or expelled from school? If so, explain \_\_\_\_\_

---

---

***Parent Questionnaire***

*In order for us to know you and your child better, please answer the following questions:*

Please explain how this student will contribute to the overall school program (beyond the academic realm).

---

---

---

---

---

---

Why do you want this student to attend Oakbrook Preparatory School? \_\_\_\_\_

---

---

---

---

---

---

What kind of discipline/reward system do you practice at home? \_\_\_\_\_

---

---

---

---

---

---

What are the future goals and plans for this student beyond high school ? \_\_\_\_\_

---

---

---

---

---

---

**Signature Page**

*Please read and sign the following statement:*

I hereby certify that all information provided on this application and all information given to Oakbrook Preparatory School is accurate and complete. ***I understand that falsification or omission of information may result in disqualification of the applicant or subsequent dismissal from Oakbrook Preparatory School.***

I also understand that all information submitted to Oakbrook is confidential and that the Admissions Committee may disclose, for official purposes only, any information received from the applicant's family. I give Oakbrook Preparatory School permission to obtain all pertinent information from preceding school(s).

Signature of parents:

Father \_\_\_\_\_ Date \_\_\_\_\_

Mother \_\_\_\_\_ Date \_\_\_\_\_

Admissions Committee:

- |                  |                        |
|------------------|------------------------|
| Amanda Ledbetter | Admission Director     |
| Adair Hinds      | Head of School         |
| Nancy Seay       | Upper School Director  |
| Dawn Rollins     | Middle School Director |
| Vickie Bolduc    | Lower School Director  |
| David Foy        | Business Manager       |
| Alexis Mannion   | Office Manager         |

*Assessment will be scheduled upon receipt of application, \$100.00 application fee, past report cards, standardized test results, and psychological and educational evaluations (if applicable). Please mail to:*

Admissions  
Oakbrook Preparatory School  
190 Lincoln School Rd.  
Spartanburg, South Carolina 29301

To enable us to better serve our school families, please supply the following information.

How did your hear about our school? Please circle one

Friend                      Advertisement                      Other (explain) \_\_\_\_\_

Please rate the reasons why you chose our school, with 1 being the first and foremost reason.

_____ Curriculum	_____ Christian environment	_____ Philosophy
_____ Tuition Rates	_____ Other (explain)	_____ Location

*Oakbrook Preparatory School does not discriminate on the basis of race, gender, national or ethnic origin, or religion.*