



Applying to St. Stephen's Episcopal School

Visit the Application Website - www.sstx.org/application - for online submission and required forms

Apply Online

- Go to www.sstx.org/application to apply online. Credit card payment of the application fee must accompany online submissions. All forms are available for download on the application website and by request. The application fee is \$50 for U.S. residents and \$100 for applicants who reside outside the U.S.

Download and Print Required Forms - Additional Requirements for Admission

All required forms are on the website and may also be printed upon completion of the online portion of the application.

- Student Questionnaire (2 pages)
- Student Essay (2 pages)
- Parent Statement (2 pages)
- Current Math Teacher Recommendation (2 pages)
- Current English Teacher Recommendation (2 pages)
- Personal Recommendation (2 pages)



Arrange for Testing

All applicants are required to submit results from either the Independent School Entrance Examination (ISEE) or Secondary School Admission Test (SSAT). Testing before or on January 31, 2010 will ensure that the scores are received by the February 1 priority application deadline.

Testing dates are limited - visit the websites early to register.

- ISEE (www.iseetest.org or 1-800-446-0320). The ISEE is administered at locations in Austin, the state, and nationally.
The ISEE code number for St. Stephen's is 440315.
- SSAT (www.ssat.org or 1-609-683-4440). Worldwide testing centers make it convenient for international students to take the SSAT. The SSAT code number for St. Stephen's is 6956.
- International students - In addition to ISEE or SSAT scores, students may submit SLEP or TOEFL scores to demonstrate English proficiency.

Report Cards & Recommendations

- Send us copies of last year's final report card and the most recent report card for this school year.
- Distribute English Teacher, Math Teacher and Personal Recommendation forms.

Interview & Class Visits

- Schedule an interview with an Admission Officer by calling 512-327-1213 ext. 210. The interview is part of the application and must be completed by the February 1st deadline for priority admission. Due to limited availability in January, we encourage families to complete their interview and class visits before December 15, 2009.
- Applicants may visit classes on designated days to meet students and teachers. Class visit details and registration are available through the admission website or by calling the Office of Admission. Class visits are optional.

More Information On...

Deadlines and Notification

Applications are accepted year round. The application deadline for the first round of admission decisions is Feb. 1, 2010. Students whose files are complete by Feb. 1 receive priority consideration for the places available. Applicants and parents are responsible for submitting application materials - biographical (online), student and parent questionnaires/essays, teacher and personal recommendations, grades, entrance exam results, and the student interview - by Feb. 1 to be considered in first round decisions. First round decisions will be mailed on March 10, 2010. After Feb. 1, applications are considered on a rolling admission basis.

Recommendation Forms


Recommendation forms, including the comments and information provided by the applicant's teachers and acquaintances are held in confidence by St. Stephen's Episcopal School and only disclosed to members of the Admission Committee or others considered necessary by the Director of Admission. To meet the February 1 priority application date, we strongly encourage applicants to distribute teacher recommendations soon after the Thanksgiving break. Recommendation forms do not become a part of the permanent record of a matriculating student.

Common Application forms for Boarding Students

In an effort to simplify the application process, and eliminate unnecessary duplication of effort, boarding applicants may elect to apply using the common application and recommendation forms offered through The Association of Boarding Schools (www.schools.com) or the Secondary School Admission Test (www.ssat.org).

www.sstx.org/application

Your resource for all application forms, questions, and checklists.



St. Stephen's Episcopal School
Office of Admission
6500 St. Stephen's Drive
Austin, Texas 78746

phone: 512-327-1213 • fax: 512-327-6771 • email: admission@sstx.org

www.sstx.org

St. Stephen's Episcopal School admits students of any race, color, national and ethnic origin, gender, or sexual orientation to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. St. Stephen's does not discriminate on the basis of race, color, national and ethnic origin, gender, or sexual orientation in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school programs.

STUDENT QUESTIONNAIRE

St. Stephen's Episcopal School

6500 St. Stephen's Drive, Austin, Texas 78746

phone: 512-327-1213 • fax: 512-327-6771 • email: admission@sstx.org

Name _____ Preferred Name _____
FIRST MIDDLE LAST/FAMILY

Current Grade _____

The Admission Committee at St. Stephen's is eager to learn as much as possible about you as an individual. Please be thoughtful, candid and detailed in your responses to the following questions. Please answer the following questions *in your own handwriting*, and in the space provided. It should be done without assistance or coaching from teachers or parents.

1. What single adjective do you think would be most frequently used to describe you by those who know you best? Briefly explain.

2. What do you think people who know you would be surprised to learn about you? Briefly explain.

2. In order of their importance to you, please use the space below to list all significant extracurricular activities. (Examples include athletic teams, fine arts, community service, part time jobs and other uses of time.)

Activity	Positions Held or Honors Received	# of Years Participated	Hours per week	I plan to continue at SSES

3. We would like to know why you are interested in St. Stephen's. What do you hope it will be like?

4. Which language would you study if you attend St. Stephen's next year? (Choose one)

_____ French _____ Spanish _____ Latin _____ Chinese

Signature _____ Date _____ Phone (_____) _____

PARENT / GUARDIAN STATEMENT

St. Stephen's Episcopal School

6500 St. Stephen's Drive, Austin, Texas 78746
phone: 512-327-1213 • fax: 512-327-6771 • email: admission@sstx.org



Student's Name _____ Current Grade _____
FIRST MIDDLE LAST/FAMILY

Name of Person Completing This Form _____

Relationship to Student _____

Please complete this form and return it to the Office of Admission as soon as possible. Should your child enroll at St. Stephen's, it will be shared with appropriate staff for the purpose of advising and/or counseling. You may type your responses and attach the sheets to this form. Please be sure to complete the required signature on the back of this page.

Boarding Applicants Only:

After reading our materials and learning more about St. Stephen's Episcopal School, how do you think your child will adapt to living away from home?

Boarding and Day Applicants:

1. Please describe your child's academic and personal strengths and areas for improvement.

CURRENT ENGLISH TEACHER

St. Stephen's Episcopal School

6500 St. Stephen's Drive, Austin, Texas 78746

phone: 512-327-1213 • fax: 512-327-6771 • email: admission@sstx.org

Student's name _____
FIRST MIDDLE LAST/FAMILY CURRENT GRADE

TO THE TEACHER: This recommendation form will remain confidential and will not become part of the student's permanent record. You are welcome to attach a narrative statement, but if you do so, we request that you complete the personal and academic qualities portion of this form as well. Please return by **February 1, 2010** for students applying for priority admission. Return information is listed above.

Postage Mail: Envelope must be sealed with the teacher signature across the back flap.

Fax: Must be sent with an official cover sheet from the school fax machine.

Email: Must be sent from the teacher's school email account.

How well do you know the student academically? _____ As a person? _____

In what years did you teach the student? _____ How large is the class? _____

Section level of course: Remedial Regular Advanced Mixed-Ability Other: _____

Please let us know what texts are used in your course. _____

How well does the student participate in class discussions, activities, and projects? _____

How would this applicant function in a challenging, college preparatory English classroom? _____

Which words best describe this student's writing ability? Conventional Creative Independent

Have absences or extracurricular activities in any way affected the student's classroom performance? _____

How well does the student accept advice or criticism? _____

How well does the student interact with his/her peers? _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	ONE OF THE TOP FEW I HAVE EVER ENCOUNTERED	EXCELLENT (TOP 10% THIS YEAR)	GOOD (ABOVE AVERAGE)	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGMENT
Academic Potential						
Academic Achievement						
Mastery of Basic Grammar Skills						
Ability to Accurately Read and Comprehend						
Ability to Write						
Intellectual Curiosity						
Willingness to Take Intellectual Risks						
Effort/Determination						
Ability to Work Independently						
Listens to and Follows Teacher's Directions						
Is Able to Take Class Notes Effectively						
Study Habits						
Time Management						
Concern for Others						
Honesty/Integrity						
Emotional Stability						
Maturity (relative to age)						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

We welcome any additional comments that you may wish to include: _____

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the candidate's application. All information you provide will be held in confidence and only disclosed to members of the Admission Committee or others considered necessary by the Director of Admission.

SIGNATURE

DATE

SCHOOL MAILING ADDRESS

PRINTED NAME

CITY, STATE, ZIP

NAME OF SCHOOL

EMAIL ADDRESS

TITLE

TELEPHONE

CURRENT MATH TEACHER

St. Stephen's Episcopal School

6500 St. Stephen's Drive, Austin, Texas 78746
 phone: 512-327-1213 • fax: 512-327-6771 • email: admission@sstx.org

Student's name _____
FIRST MIDDLE LAST/FAMILY CURRENT GRADE

TO THE TEACHER: This recommendation form will remain confidential and will not become part of the student's permanent record. You are welcome to attach a narrative statement, but if you do so, we request that you complete the personal and academic qualities portion of this form as well. Please return by **February 1, 2010** for students applying for priority admission. Return information is listed above.
Postage Mail: Envelope must be sealed with the teacher signature across the back flap.
Fax: Must be sent with an official cover sheet from the school fax machine.
Email: Must be sent from the teacher's school email account.

This student is enrolled in: Math 5 Math 6 Math 7 Math 8 Pre-Algebra Algebra I Algebra II
 Geometry Algebra II Pre-Calculus Other: _____

Section level of course: Remedial Regular Advanced Mixed-Ability Other: _____

Textbook(s) used: _____ Grade Level of textbook: _____

Briefly describe your course. _____

Suggested math placement for next year: _____

Has this student used a calculator? _____ If so, which one? _____

How would this applicant function in a challenging, college preparatory math classroom? _____

Which words best describe this student's mathematical thinking? Conventional Creative Independent

Have absences or extracurricular activities in any way affected the student's classroom performance? _____

How well does the student accept advice or criticism? _____

How well does the student interact with his/her peers? _____

Please place check marks at the points that represent your evaluation of the student in comparison to other students in his or her age group whom you have taught. If you have no fair basis for judgment, do not hesitate to say so.

	ONE OF THE TOP FEW I HAVE EVER ENCOUNTERED	EXCELLENT (TOP 10% THIS YEAR)	GOOD (ABOVE AVERAGE)	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGMENT
Academic Potential						
Academic Achievement						
Mastery of Basic Computational Skills						
Ability to Retain Mathematical Concepts						
Ability to Apply Concepts in New Situations						
Intellectual Curiosity						
Willingness to Take Intellectual Risks						
Effort/Determination						
Ability to Work Independently						
Listens to and Follows Teacher's Directions						
Is Able to Take Class Notes Effectively						
Study Habits						
Time Management						
Concern for Others						
Honesty/Integrity						
Emotional Stability						
Maturity (relative to age)						
Respect Accorded by Faculty						
Respect Accorded by Peers						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

What are the first three words that come to mind to describe this student?

1. _____ 2. _____ 3. _____

We welcome any additional comments that you may wish to include: _____

Thank you for taking your valuable time to complete this evaluation. Your reflections are an important part of the candidate's application. All information you provide will be held in confidence and only disclosed to members of the Admission Committee or others considered necessary by the Director of Admission.

SIGNATURE DATE

PRINTED NAME

NAME OF SCHOOL

TITLE

SCHOOL MAILING ADDRESS

CITY, STATE, ZIP

EMAIL ADDRESS

TELEPHONE

PERSONAL RECOMMENDATION

St. Stephen's Episcopal School

6500 St. Stephen's Drive, Austin, Texas 78746

phone: 512-327-1213 • fax: 512-327-6771 • email: admission@sstx.org

TO THE STUDENT: Please give this form to an adult other than a relative who knows you well such as a coach, other teacher, youth group director, employer, volunteer coordinator, priest or minister.

Student's name _____

FIRST

MIDDLE

LAST/FAMILY

CURRENT GRADE

TO THE RECOMMENDER: This recommendation form will remain confidential and will not become part of the student's permanent record. You are welcome to attach a narrative statement, but if you do so, we request that you complete the specific questions we have listed on this form as well. Please return by **February 1, 2010** for students applying for priority admission. Return information is listed above.

Postage Mail: Envelope must be sealed with your signature across the back flap.

Fax: Must be sent with a cover sheet from the home or office fax machine.

Email: Must be sent from the recommender's personal email account.

How long have you known this student? _____

What is your relationship to this student? _____

Please describe this student using words which first come to your mind. _____

How would you describe the applicant's work ethic, self-esteem, and personal resilience? _____

Continue on Back Please

