



San Marcos Academy

Admissions Procedures and Checklist

Thank you for your interest in San Marcos Academy. We welcome your application for admission to our school. A completed application to San Marcos Academy consists of the following items:

- ✓ Application for admission and report of medical history, completed and signed by the custodial parent.
- ✓ A \$150.00 non-refundable application fee.
- ✓ A school transcript of grades with achievement and/or I.Q. test results (if available) for Grade 6-12 applicants or a copy of the most recent report card for Grade 5 applicants.
- ✓ Two teacher evaluations from the school last attended: one from the student's English teacher and one from the student's math or science teacher. For Grade 5 applicants, a recommendation from the current teacher is sufficient.
- ✓ A personal interview & campus visit with the applicant and parent(s) is required prior to final acceptance. The interview may be waived or modified for out-of-state and international students.
- ✓ A copy of the student's birth certificate. International students must also submit a copy of their passport.

Online Application Submission

1. From the home page of our website (<https://smabears.org>) click on the "Apply Now" button at the top of the page or go to our "How to Apply" page at <https://smabears.org/how-to-apply.php>.
2. Click on the green "Online Application" button to enter our online application portal. There you may create a family account and start a New Student Application for your child. You will then have the flexibility to log in and out of your account and access your open application until it is completed.
3. After submitting the application and medical history, you will be able to track online your admission status at the school by logging in to your account. There you will be able to print the completed application and monitor when the school receives supplemental application forms, such as recommendation forms and transcripts.
4. You will be asked to provide email addresses for the required teacher recommendation(s). Teachers will receive a link to the recommendation that allows them to complete and submit their form online. Once the recommendation is submitted, you will receive an email confirmation.
5. Scan and upload copies of the applicant's most recent report card and/or school transcripts. *Official transcripts from the school are not required at this time.* You can also scan and upload any standardized or achievement test reports or other educational testing results.

6. Scan and upload a copy of the student's birth certificate and, for international students, a copy of the student's passport. Additional documentation, such as custody documents and JROTC certificate of training may also be scanned and uploaded. A recent photo of the student is requested as well.
7. The \$150 non-refundable application fee can be paid online via Smart Tuition on our Tuition and Fees page, where other financial information is posted:
<https://smabears.org/tuitions-fees.php>
The application fee may also be paid by check, made out to San Marcos Academy.

Note: Those who prefer not to use our online application may print copies of the required forms and a checklist from our How to Apply page: <https://smabears.org/how-to-apply.php>

Appointment for Personal Interview

A personal interview with the applicant and parent(s) is required prior to final acceptance. Please contact the admissions office (512-753-8000 or **admissions@smabears.org**) at any point during the application process to schedule your interview at 9 a.m. or 2 p.m. on any weekday. *Note: The interview may be waived or modified for out-of-state and international students.*

Notification

Applications are accepted year round. When the application process is complete, the Admissions Committee will meet to consider the applicant. Parents will be notified of their decision, usually within one week. If the student is accepted, an agreement for admissions will be sent along with a request for a deposit. U.S. boarding students pay a non-refundable deposit of \$500.00 while day students pay a non-refundable deposit of \$100.00. International students must pay a deposit of \$2500.00 in order for the Academy to issue an I-20 (\$500 is non-refundable should the student fail to acquire a visa) All deposits are applied to the total program cost.

Questions? Contact Us!

If you have questions at any point in the application process, we encourage you to contact our office by phone or email.

<https://smabears.org/how-to-apply.php>
San Marcos Academy Office of Admissions
2801 Ranch Road 12 * San Marcos, Texas 78666
512-753-8000 (office) * 512-753-8031 (fax)
admissions@smabears.org * <https://smabears.org>

Founded in 1907, San Marcos Academy is a fully accredited coeducational college prep boarding and day school. Students are accepted without regard to faith, race, nationality or ethnic origin.



San Marcos Academy

Application for Admission (Grades 6-12)

_____ Fall _____ Spring Semester of _____ (year)

Applying to be a _____ Boarding (5-day) _____ Boarding (7-day) or _____ Day Student

*Referred by: _____

APPLICANT INFORMATION:

Last Name First Middle Preferred Name or Nickname

Home Address/Number/Street Social Security Number

City State/Province Country Zip/Postal Code

Date of Birth (Month/Day/Year) Country of Birth Country of Citizenship

Gender Age Current Grade Grade Applying Ethnicity

FAMILY INFORMATION:

_____ *Father or* _____ *Stepfather*

Last Name First Middle Drivers License Number/State

Home Address/Number/Street Social Security Number

City State/Province Country Zip/Postal Code

Employer Occupation E-mail Address

(_____) _____ (_____) _____ (_____) _____ (_____) _____
Home Phone Cell Phone Business Phone Fax Number

_____ *Mother or* _____ *Stepmother*

Last Name First Middle Drivers License Number/State

Home Address/Number/Street Social Security Number

City State/Province Country Zip/Postal Code

Employer Occupation E-mail Address

(_____) _____ (_____) _____ (_____) _____ (_____) _____
Home Phone Cell Phone Business Phone Fax Number

Applicant lives with: ___ Father ___ Mother ___ Both ___ Other _____

To Whom should financial statements be sent? ___ Father ___ Mother ___ Both ___ Other _____

Check if appropriate: ___ Father is Deceased ___ Parents Divorced ___ Father Remarried ___ Student is Adopted
___ Mother is Deceased ___ Parents Separated ___ Mother Remarried ___ Parents Living outside of U.S.

If parents are divorced, separated, or deceased, who has LEGAL CUSTODY of the applicant? _____
Please provide copies of custody documents

If parents are divorced, what legal rights does the non-custodial parent have? _____

Identify others who have legal rights pertaining to the applicant and specify rights.

Name _____ Rights _____

Name _____ Rights _____

Applicant's Religion/Denomination: _____ Applicant's Church Membership _____

Does applicant have relatives who graduated from San Marcos Academy? ___(Yes) ___(No) If yes, whom?

Name of Relative (if more than one, use additional sheet) Relationship to student Date Graduated

EMERGENCY CONTACT: (If unable to contact parent/guardian, whom should we contact?)

Name Relationship to Student

Address/number/street City State Zip code

(____) _____ (____) _____ (____) _____
Home Phone Cell Phone Business Phone E-mail Address

Sibling Information

Name Age School

Name Age School

For International Students:
Stateside Guardians or Sponsors

First Name Middle Last Drivers License Number/State

Home Address/Number/Street Social Security Number

City State/Province Country Zip/Postal Code

Employer Occupation

(____) _____ (____) _____ (____) _____
Home Phone Cell Phone Business Phone E-mail Address

EDUCATION:

Present School

Name of School _____
Dates of Attendance

Address City State/Province Zip/Postal code

Previous Schools

Name of School City State/Province _____
Dates of Attendance

Name of School City State/Province _____
Dates of Attendance

Has student EVER been involved in any activity that led to an investigation by school or other civil authorities, or has student EVER been involved in circumstances or with habits adverse to good conduct? ***This question must be answered and will be treated confidentially. False or misleading information, if later revealed as such, constitutes grounds for dismissal.***

___ NO ___ YES. If "yes, please explain in detail. Use additional sheet if necessary...

Present Scholastic Average: ___ 90-100 ___ 80-90 ___ 70-80 ___ below 70

Has student ever received credit for any part of Junior ROTC? ___(Yes) ___(No). If Yes, attach certificate of training.

Has applicant ever attended San Marcos Academy before? ___(Yes) ___(No). If Yes, when? _____

PERSONAL INTEREST INFORMATION (to be filled out by student):

Describe your participation in school activities (clubs, school offices, volunteer groups, the arts, athletics, etc.) List any awards or honors received.

Describe your participation in hobbies, activities, and groups not associated with school (camps, community service, jobs, travel). List any awards or honors received.

Describe a person you admire or who has influenced you a great deal.

What makes you the interesting person that you are?

Why are you applying to San Marcos Academy?

What do you hope to gain from attending San Marcos Academy?

What reading have you enjoyed most in the past year?

Applicant's signature

Date

Parent/Guardian signature

Date

FAMILY HISTORY:

	Name	Age	State of Health	Age at Death	Cause of Death
Father					
Mother					

PERSONAL HISTORY: Please answer all questions. Use space below for comments.

Have you Had:	Yes	No		Yes	No
Scarlet Fever			Allergies		
Measles			Penicillin		
German Measles			Sulfonamides		
Mumps			Serum		
Chicken Pox (month/year)			Foods (which)		
Malaria			Other:		
Gum or Tooth Trouble			High or Low Blood Pressure		
Diabetes			Rheumatic Fever/Heart Murmur		
Eye Trouble			Weakness/Paralysis		
Ear, Nose, Throat Trouble			Disease or Injury of Joints		
Surgery:			Jaundice		
Appendectomy			Stomach or Intestinal Trouble		
Tonsillectomy			Gallbladder Trouble/Gallstones		
Hernia Repair			Recurrent Diarrhea		
Other:			Ruptured Hernia		
Insomnia			Recent Gain/Loss of Weight		
Frequent Anxiety			Dizziness/Fainting		
Depression			Kidney Stones		
Recurrent Headaches			Kidney Disease		
Recurrent Colds			Venereal Disease		
Head Injury w/Unconsciousness			Albumin/Sugar Urine		
Epilepsy/Convulsions			Frequent urination		
Asthma					
Tuberculosis			FEMALES ONLY		
Shortness of Breath			Irregular Periods		
Pain/Pressure in Chest			Severe Cramps		
Chronic Cough			Excessive Flow		
Palpitations (heart)			Other:		

The purpose of this section is to assess whether or not San Marcos Academy can support your student's learning:

A. Has the student's physical activity been restricted during the past five years? Explain.

- B. Has the student had any illness, injury or been hospitalized in the past five years? Explain.**
- C. Has the student had difficulty with school, studies, or teachers? Explain.**
- D. Is the student currently taking any prescription medication? If so, please list.**
- E. Has the student received a psychological evaluation, a psychiatric evaluation, or a special education evaluation? Explain.**
- F. As a result of the evaluation, is there a current treatment plan, including medication? Explain.**

San Marcos Academy

ADMISSIONS OFFICE
2801 Ranch Road Twelve
San Marcos, Texas 78666-9406

TELEPHONE:
(512) 753-8000

FAX:
(512) 753-8031

ENGLISH TEACHER'S EVALUATION

NAME OF APPLICANT _____ CURRENT GRADE _____

Academic Evaluation: (Please check appropriate rating)

	Limited	Fair	Average	Good	Excellent
Academic Potential					
Academic Achievement					
Attention Span					
Classroom Conduct					
Self-Confidence					
Fulfills Responsibilities					
Maturity in Terms of Age/Grade					
Leadership Potential					
Respect for Teachers					
Respect for Peers					

Please give us your candid opinion of the above named applicant. We wish to know his/her work habits, motivations, and general character. What are his/her best qualities? What are his/her weakest qualities? What can we do to help him/her achieve success? (For more space, please use the back of this sheet.)

Name of Teacher: _____ School: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Telephone: _____

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MATH/SCIENCE TEACHER'S EVALUATION

NAME OF APPLICANT _____ CURRENT GRADE _____

Academic Evaluation: (Please check appropriate rating)

	Limited	Fair	Average	Good	Excellent
Academic Potential					
Academic Achievement					
Attention Span					
Classroom Conduct					
Self-Confidence					
Fulfills Responsibilities					
Maturity in Terms of Age/Grade					
Leadership Potential					
Respect for Teachers					
Respect for Peers					

Please give us your candid opinion of the above named applicant. We wish to know his/her work habits, motivations, and general character. What are his/her best qualities? What are his/her weakest qualities? What can we do to help him/her achieve success? (For more space, please use the back of this sheet.)

Name of Teacher: _____ School: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Telephone: _____