

**STUDENT #1 INFORMATION**

Date: \_\_\_\_\_

**Applying to which program? (Circle all that apply):** Band Orchestra Choir Other

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Address \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone # \_\_\_\_\_

Grade Entering in Fall 2025 \_\_\_\_\_

**STUDENT #2 INFORMATION**

Date: \_\_\_\_\_

**Applying to which program? (Circle all that apply):** Band Orchestra Choir Other

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Address \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone # \_\_\_\_\_

Grade Entering in Fall 2025 \_\_\_\_\_

**STUDENT #3 INFORMATION**

Date: \_\_\_\_\_

**Applying to which program? (Circle all that apply):** Band Orchestra Choir Other

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Address \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone # \_\_\_\_\_

Grade Entering in Fall 2025 \_\_\_\_\_

**Parent/Guardian Information**

Mother/Guardian (please print) \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Father/Guardian (please print) \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

St. Croix Preparatory Academy welcomes applicants regardless of race, ethnicity, socio-economic status, gender, special needs or English as a second language status

Return form to:

St. Croix Preparatory Academy  
4260 Stagecoach Trail North  
Stillwater, MN 55082