

## Student Information

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**Directions:** Please complete the lines below, detach this sheet, and give it to your current school.

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**I authorize the release of my child's school records to La Lumiere School.**

Parent/Guardian Name: \_\_\_\_\_

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

## School Information

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The above named student is applying to La Lumiere School. Would you please send the following to:

**La Lumiere School  
Office of Admissions  
P.O. Box 5005  
La Porte, IN 46352**

**Phone: 219-326-7350  
Fax: 219-325-3185  
E-mail: [admissions@lalumiere.org](mailto:admissions@lalumiere.org)  
[www.lalumiere.org](http://www.lalumiere.org)**

- School report/transcript for current and prior years
- Results of achievement and/or aptitude tests
- Attendance record
- Grades in progress