For Office Use
DOB Verified Y/N
T.E.
Check #

Saint Luke Christian Day School

9100 Colesville Road
Silver Spring, MD 20910
www.saintlukekids.org
301-588-3866
cds@saintlukekids.org

For Office Use
Date Received:

Application for Admission - School Year 2025-2026

- ✓ For each student, please submit: 1) a completed application, 2) a copy of your child's birth certificate (new students only) and, 3) the **$70.00** Non-Refundable Application Fee.
- ✓ INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.
- ✓ Priority Application Period: **January 17, 2025- February 7, 2025.**
- ✓ Students will be accepted on a first-come, first-served basis. After February 7, applications will be considered to fill remaining spaces as available.

Student First Name and "Nickname"	**Student Middle Name**	**Student Last Name**	**Date of Birth MM/DD/YY**
Street Address		**City/State/Zip**	
Primary Phone		**Primary Email**	
Guardian 1 First Name	**Guardian 1 Last Name**	**Cell Phone**	**Work Phone**
Guardian 2 First Name	**Guardian 2 Last Name**	**Cell Phone**	**Work Phone**
Check One: New_____	**Returning Student_____**	**Sibling of Student____**	**Sibling of Alumni __**
Primary email above will be used for the majority of school communications. Please list additional family email to which you would like emails copied:			

How did you hear about us? _____

Where else have you applied? _____

Please list any services, activities, or preschools your child has received/attended:

_____

_____

Race: (Optional, circle all that apply) American Indian or Alaskan Native/ White/ Asian/ Black or African American/ Native Hawaiian or other Pacific Islander/ Other.

The Saint Luke Christian Day School admits families of any race, color, national or ethnic origin, or sexual orientation to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin, or sexual orientation in classrooms or other school administered programs.

School Year 2025-2026 Program Offerings

Please indicate a 1st & 2nd Choice. Classes are subject to meeting a minimum enrollment.

Mark Choice (1 & 2)	Class	School Days	Hours	Annual Tuition (monthly)	Birthday
	2s	Tuesday & Thursday	9:00am-12:00pm	$3,645.00 ($405)	2 by 09/01/2025
	2s	Mon, Wed, Fri	9:00am-12:00pm	$4,725.00 ($525)	2 by 09/01/2025
	2s	Monday-Friday	9:00am-12:00pm	$ 7,875.00 ($875)	2 by 09/01/2025
	3s*	Mon, Tue, Wed	9:00am-1:00pm	$6,255.00 ($695)	3 by 09/01/2025
	3s*	Monday-Thursday	9:00am-1:00pm	$7,875.00 ($875)	3 by 09/01/2025
	3s*	Monday-Friday	9:00am-1:00pm	$9,261.00 ($1,029)	3 by 09/01/2025
	Pre-K*	Monday-Thursday	9:00am-1:00pm	$7,875.00 ($875)	4 by 09/01/2025
	Pre-K*	Monday-Friday	9:00am-1:00pm	$9,261.00 ($1,029)	4 by 09/01/2025

Three-year-old and Pre-K children must be toilet trained before entering school.

You must fill out a separate application to be eligible for scholarship aid.

FAMILY COMMITMENT

If I enroll my child in Saint Luke Christian Day School:

- I agree to support the policies of Saint Luke Christian Day School and the State of Maryland.
- I agree to support the policies of the regularly updated Centers for Disease Control and Prevention, Maryland Department of Health & Maryland State Department of Education.
- I understand that all children entering care must have immunization records, which meet the guidelines of the Maryland Department of Health. Each child must have at least one dose of each vaccine appropriate for the child's age and a schedule to complete required immunizations.
- I agree to faithful, regular tuition and fee payments from August 1, 2025 – April 1, 2026.
- I understand that one month's advance tuition deposit will be due with the signed enrollment contract. This tuition deposit is credited toward the April 2026 installment and is **NON-REFUNDABLE.**
- Upon enrollment, I understand I am financially responsible for tuition and fees for **the Entire School Year**.
- I understand the late tuition payment fee is $30.00 and the returned check fee is $30.00.
- I agree to notify CDS in writing of any changes in address or family status.
- All information submitted and the statements made in this application for admission are true to the best of my knowledge.

Agreed on this date:

_____

Parent/Guardian Signature **Date**

Extended Play (optional)

I am interested in aftercare from 1:00-3:30pm for my child enrolled in a 3s or Pre-K class.
Please provide me with an application for this additional service: _____ **Yes** _____**No**