

<p>APPLICATION Check (✓) One: <input type="checkbox"/> New Student <input type="checkbox"/> Re-registering Student</p>

ENROLLMENT FOR: Academic Year Beginning: _____ PRESCHOOL GRADE: _____

_____ Male Female

Last Name
First Name
Middle Name
Gender

Name you wish your child to be called: _____

Address (PO Box, if applicable)
City
State
Zip
Telephone Number

_____/_____/_____

Date of Birth (mm/dd/yyyy)
Place of Birth
Religion
Parish
City

Yes No ____/____/_____

Baptized
Baptism Date (mm/dd/yyyy)
Parish
City

(If yes, please supply Baptismal Record)

Yes No ____/____/_____

First Communion Date (mm/dd/yyyy)
Parish
City

Parish Affiliation _____ Pastor's Name _____

School Previously Attended (including preschool)
City
State
Dates Attended
Grade(s) Attended

School Previously Attended (including preschool)
City
State
Dates Attended
Grade(s) Attended

If additional space is needed to list schools previously attended, please list on a separate piece of paper.

Will the above named child require busing? Yes No

FAMILY INFORMATION

Student Lives With:

Mother and Father Mother Father Mother and Stepfather Father and Stepmother Other _____
(RELATIONSHIP TO STUDENT)

Father:

Last Name
First Name
Middle Initial

 Please provide your address if it is different than the student's address:

Street Address (PO Box, if applicable)
City
State
Zip

Telephone [please check (✓) primary number]: Home _____ Work _____ Cell _____

Occupation
Place of Employment
City
State

Religion
Church/Parish
City
State

Email Address: _____



Education with a Plus!

Mother:

Last Name	First Name	Middle Initial	
Please provide your address if it is <u>different</u> than the student's address:			
Street Address (PO Box, if applicable)	City	State	Zip
Telephone [please check (✓) <u>primary</u> number]: <input type="checkbox"/> Home _____ <input type="checkbox"/> Work _____ <input type="checkbox"/> Cell _____			
Occupation	Place of Employment	City	State
Religion	Church/Parish	City	State
Email Address: _____			

Legal Guardian (if other than parent) **or Custodial Parent** (please provide a copy of the custodial order)

Last Name	First Name	Middle Initial	Relationship
Please provide your address if it is <u>different</u> than the student's address:			
Street Address (PO Box, if applicable)	City	State	Zip
Telephone [please check (✓) <u>primary</u> number]: <input type="checkbox"/> Home _____ <input type="checkbox"/> Work _____ <input type="checkbox"/> Cell _____			
Email Address: _____			

Parent/Guardian Special Interests, Memberships in Community or Civic Organizations (optional)

Name of Student's Step-parent (if applicable)

Last Name	First Name	Maiden Name
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List Sibling Information (If more space is needed, please list on a separate sheet of paper and attach to this form):

Name	Age	Grade	Gender	School
Name	Age	Grade	Gender	School
Name	Age	Grade	Gender	School

STUDENT MEDICAL AND EMERGENCY INFORMATION

Emergency Contacts (other than child's parents or guardians):

Full Name	Relationship	Area Code & Telephone	
Street Address (PO Box, if applicable)	City	State	Zip
Full Name	Relationship	Area Code & Telephone	
Street Address (PO Box, if applicable)	City	State	Zip

St. Mary’s School Student Agreement

In order to enhance the academic and extracurricular experiences of every child enrolled at St. Mary’s School, we must work together as parents, students, and school personnel. We want to begin your time as a student at St. Mary’s with a clear understanding of our expectations of you and for all. As a member of the St. Mary’s community, you agree to:

1. support and encourage the Catholic-Christian Gospel values that are central to the philosophy and mission of St. Mary’s School;
2. support the rules and regulations detailed in the Parent/Student Handbook;
3. perform academically to the best of your ability and complete all assignments on time;
4. respect all school personnel and students;
5. understand the importance of being present at school on a daily basis and arriving on time.

With my signature, I agree to follow the terms listed above at St. Mary’s School. I understand that this contract is binding and will be enforced. St. Mary’s School reserves the right to amend this Student Agreement.

Student Signature

Parent/Guardian Signature

Date

NOTES:

- The completed application should be returned along with:
 - non-refundable registration fee, per child, applicable to tuition (\$100.00)
 - Child’s most recent report card (applies to new students entering Grade 1 through Grade 8)
 - Child’s most recent standardized test results (applies to new students)
 - Child’s most recent IEP (if applicable)
 - Baptismal Certificate (if Catholic)
 - Birth Certificate or Passport
 - Immunization Records
- Please note: an interview with the student applicant is part of the admissions process. Parents are kindly asked to contact the school office to schedule an interview for their child with the principal.
- St. Mary’s School reserves the right to administer an entrance screening to any student applicant.
- Page 4 of this application will help us understand how families hear about our Catholic Schools and why they choose to provide a high quality faith-based education for their child(ren).

General Information

How did you hear about our school?

Has your child ever been enrolled in another *preschool* and/or *kindergarten* program? Yes No

If Yes, please indicate where: _____

What most influenced your decision to enroll your child at St. Mary’s School?

What do you hope your child will gain from this experience?

Is there any additional information that can help us in the classroom? (Please explain)
