

# SAINT CATHERINE

## of Siena Parish School

### 2020—2021 NEW STUDENT APPLICATION FOR ADMISSION

PLEASE COMPLETE ONE APPLICATION PER CHILD YOU WISH TO ENROLL IN THE SCHOOL .  
Please return the completed form to the Admissions Office along with **\$100.00 non-refundable application fee.**

| GRADE                     | COMMENT                       |
|---------------------------|-------------------------------|
| Transitional Kindergarten | 4 years old as of September 1 |
| Kindergarten              | 5 years old as of September 1 |
| First                     | 6 years old as of September 1 |

Circle grade student **will be** entering:  
TK K 1 2 3 4 5 6 7 8

**Student Information:**

Applicant's Name \_\_\_\_\_ Sex: M F Age \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ Baptized Catholic?  Yes  No

Present Grade \_\_\_\_\_ Grade Applying for \_\_\_\_\_ Language (s) spoken at home \_\_\_\_\_

**Father/Guardian** \_\_\_\_\_ Religion \_\_\_\_\_  

First
Middle Initial
Last

Address \_\_\_\_\_ City/Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Work Number \_\_\_\_\_ Cell Number \_\_\_\_\_  
 Email: \_\_\_\_\_  
 St. Catherine of Siena Parishioner?  YES  NO If No, Parish name \_\_\_\_\_

**Mother/Guardian** \_\_\_\_\_ Religion \_\_\_\_\_  

First
Middle Initial
Last

Address \_\_\_\_\_ City/Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Occupation \_\_\_\_\_ Work Number \_\_\_\_\_ Cell Number \_\_\_\_\_  
 Email: \_\_\_\_\_  
 St. Catherine of Siena Parishioner?  YES  NO If No, Parish name \_\_\_\_\_

\*This space for administrative use only\*

|               |                   |                            |                    |                        |                     |
|---------------|-------------------|----------------------------|--------------------|------------------------|---------------------|
| <b>Accept</b> | <b>Non-Accept</b> | <b>Probationary Accept</b> | <b>Parishioner</b> | <b>Non-Parishioner</b> | <b>Non-Catholic</b> |
|---------------|-------------------|----------------------------|--------------------|------------------------|---------------------|

Date Rec'd \_\_\_\_\_  Sibling(s) currently attend SCSPS  Sibling(s) also applying in grades: \_\_\_\_\_  
 Test Date \_\_\_\_\_ Teacher administering test \_\_\_\_\_ Interview date \_\_\_\_\_  
 Comments \_\_\_\_\_  
 Birth Certificate  Baptismal Cert.  Recent Report Card  Immunization Record  Physical Examination Record  
 Application Fee Paid \_\_\_\_\_  Registration Fee Paid \_\_\_\_\_  Transcripts Requested

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## 2020—2021 NEW STUDENT APPLICATION FOR ADMISSION—PAGE 2

### Required Documents for Registration:

- Birth Certificate
- Baptismal Certificate
- First Reconciliation and First Eucharist Certificate (if applicable)
- Verification of Immunizations
- Report card (last semester/trimester) - for students entering grades 1—8
- Standardized test scores—most current results

### Home Condition:

- 1. Mother & Father present at home
- 2. Single Parent
- 3. Parents Divorced
- 4. Mother Deceased
- 5. Father Deceased
- 6. Mother Remarried
- 7. Father Remarried
- 8. Other \_\_\_\_\_

### Ethnic Origin (Optional, this information is only used for our yearly Diocesan survey.)

- 1. Hispanic
- 2. Asian/Pacific Islander
- 3. American Indian
- 4. Caucasian
- 5. African American
- 6. Multiracial
- 7. Other \_\_\_\_\_

### Additional Information:

- List any allergies \_\_\_\_\_
- Please provide information regarding any academic or physical accommodations which may be needed for your child to succeed in the classroom, if applicable. Attach information/call for an appointment with school administration upon application.
- Is there a second language spoken in your home?  Yes  No Language \_\_\_\_\_
- Has your child ever been retained?:  Yes  No If yes, what grade level? \_\_\_\_\_
- Has your child ever been subjected to severe disciplinary action (i.e. suspension or expulsion)?  Yes  No

Explain how you are involved in your parish and your reason(s) for wanting to enroll your child at Saint Catherine of Siena Parish School.

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