



APPLICATION FOR ADMISSION

STUDENT INFORMATION:

APPLYING FOR GRADE _____ AGE _____

FULL NAME _____
FIRST MIDDLE LAST SUFFIX

NICKNAME _____ GENDER ___ M / F _____

ETHNICITY: WHITE ___ BLACK ___ HISPANIC ___ ASIAN ___ AMERICAN INDIAN ___ MULTI-RACIAL ___

SOCIAL SECURITY # _____ BIRTH DATE _____ RELIGION _____

BAPTISM DATE _____ PARISH REGISTERED AT _____

WITH WHOM DOES STUDENT LIVE? _____
(IF STUDENT LIVES WITH A GUARDIAN OTHER THAN A NATURAL PARENT, PROOF OF LEGAL GUARDIANSHIP MUST BE PRESENTED AT THE TIME OF ENROLLMENT.)

WHAT LANGUAGE IS PRIMARILY SPOKEN IN THE HOME? _____

CURRENT SCHOOL INFORMATION:

CURRENT GRADE _____ PRESENT SCHOOL _____

TEACHER'S NAME _____

PRINCIPAL OR HEAD OF SCHOOL _____

SCHOOL ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____ TELEPHONE _____

FATHER/GUARDIAN:

FULL NAME: _____
FIRST MIDDLE LAST SUFFIX

OCCUPATION: _____ EMPLOYER: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____

STREET ADDRESS: _____ CITY: _____

STATE/ZIP: _____ FAMILY E-MAIL: _____

MOTHER/GUARDIAN:

FULL NAME: _____
FIRST MIDDLE LAST SUFFIX

OCCUPATION: _____ EMPLOYER: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____

STREET ADDRESS: _____ CITY: _____

STATE/ZIP: _____ FAMILY E-MAIL: _____

DID A CURRENT ST. ANNE SCHOOL FAMILY/TEACHER/STAFF RECOMMEND ST. ANNE SCHOOL TO YOU? YES NO
IF 'YES', PLEASE NAME THE FAMILY _____

HOW DID YOU LEARN ABOUT ST. ANNE SCHOOL?

PLEASE ANSWER THE FOLLOWING:

1. WHAT IS THE HIGHEST-GRADE LEVEL YOU PLAN FOR YOUR CHILD TO COMPLETE AT ST. ANNE? _____
2. WHY DO YOU WANT YOUR CHILD TO ATTEND SAINT ANNE CATHOLIC SCHOOL?

3. WHAT SPECIAL HEALTH NEEDS DOES YOUR CHILD HAVE?

4. WHAT SPECIAL EMOTIONAL NEEDS DOES YOUR CHILD HAVE? _____

5. WHAT SPECIAL LEARNING NEEDS DOES YOUR CHILD HAVE? _____
6. HAS THE APPLICANT EVER BEEN REFERRED FOR A PROFESSIONAL EVALUATION FOR ANY REASON?
(DOCUMENTATION MUST BE SUBMITTED AT REGISTRATION) _____
7. HAS THE APPLICANT EVER BEEN SUSPENDED OR DISMISSED FROM SCHOOL FOR ACADEMIC,
DISCIPLINARY, OR OTHER REASONS?

8. HAS THE STUDENT HAD ANY CHRONIC DISCIPLINARY PROBLEMS OR CHRONIC ATTENDANCE
PROBLEMS?

CONDITIONS AND TERMS OF AGREEMENT:

The information on this application is true and accurate to the best of my knowledge. Saint Anne Catholic School **requires** documentation of identified needs. The school reserves the right to decide the child's enrollment based on full disclosure of any of the evaluations. A copy of last year's/current year report card and tests scores is required at registration. Failure to disclose information may result in immediate dismissal of student.

I UNDERSTAND AND AGREE TO THE FOLLOWING CONDITIONS OF ADMISSION:

1. THIS FORMAL APPLICATION FOR ADMISSION WILL NOT BE CONSIDERED COMPLETE UNTIL ALL REGISTRATION REQUIREMENTS ARE MET, INCLUDING PRIOR SCHOOL RECORDS RECEIVED BY ST. ANNE SCHOOL.
2. ENROLLMENT IN A CLASS IS CONTINGENT UPON ADMISSION SCREENING RESULTS AND AVAILABLE SPACE.
3. STUDENTS ARE ADMITTED FOR ONE YEAR AT A TIME, AND REGISTRATION IS CONDUCTED ANNUALLY.
4. ALL NEW STUDENTS ARE ACCEPTED ON A PROBATIONARY BASIS UNTIL THEIR ADJUSTMENT AND PERFORMANCE CAN BE IDENTIFIED DURING THE FIRST QUARTER OF ENROLLMENT.
5. SAINT ANNE SCHOOL DOES NOT DISCRIMINATE BASED ON RACE, COLOR, NATIONALITY, AND ETHNIC ORIGIN IN ADMINISTRATION OF ITS EDUCATIONAL AND ADMISSION POLICIES.
6. IF MY CHILD IS ENROLLED IN ST. ANNE, I AGREE TO COMPLY WITH THE RULES OF THE SCHOOL.

PARENT/GUARDIAN SIGNATURE

DATE

APPLICATION FEE RECEIVED _____

DATE

INITIALS