



January 3, 2012

Dear Interested Family:

Welcome to Assumption Catholic School. Attached to this letter is a copy of our application for the 2012-2013 school year as well as pertinent information concerning the School. Registered parishioners who are actively involved in parish life will receive priority consideration for acceptance into Assumption.

It is the practice of our school to personally meet and speak with prospective families, including the children, before they are invited to join the school. Meetings will be scheduled during the months of February and March. Upon receipt of the completed application packet, you will be contacted by the school registrar (on a first-come-first-serve basis) to schedule a meeting at a mutually convenient time. Meeting times are available on Tuesdays, Wednesdays and Thursdays only. Prospective students, entering grades 2-8, are also required to take an assessment to determine math and reading placement. Details will be provided at the time of your meeting.

Please complete the application in its entirety and submit it along with the following:

A copy of the child's most recent standardized test results (if applicable)

A copy of the child's most recent report card (if applicable)

A current family photograph (non-returnable)

A letter from your Pastor confirming Parish Membership (if not registered here at Assumption, and you are requesting in-parish tuition)

Please place all items in an envelope marked "New Admission" and deliver it to the school office. Feel free to contact us if you should have any questions regarding this process.

Blessings

Mrs. Angie Fuller, Principal

Enclosures: New Family Application Packet



2012-2013 Academic School Year
APPLICATION FOR NEW FAMILY ADMISSION

Parents' Names: _____ Parish Registered In: _____

Applying for the following children:

Name _____ Grade in 12-13 _____ Date of Birth _____

Place of Baptism _____ Place of First Holy Communion _____

Child's Ethnicity: Is this child Hispanic/Latino? _____ Gender: Male Female

If you answered no to the question above, please indicate your child's race by circling the choices below that apply:
Asian/American Indian/Alaska Native/Black/African American/White/Native Hawaiian/Pacific Islander

Name _____ Grade in 12-13 _____ Date of Birth _____

Place of Baptism _____ Place of First Holy Communion _____

Child's Ethnicity: Is this child Hispanic/Latino? _____ Gender: Male Female

If you answered no to the question above, please indicate your child's race by circling the choices below that apply:
Asian/American Indian/Alaska Native/Black/African American/White/Native Hawaiian/Pacific Islander

Name _____ Grade in 12-13 _____ Date of Birth _____

Place of Baptism _____ Place of First Holy Communion _____

Child's Ethnicity: Is this child Hispanic/Latino? _____ Gender: Male Female

If you answered no to the question above, please indicate your child's race by circling the choices below that apply:
Asian/American Indian/Alaska Native/Black/African American/White/Native Hawaiian/Pacific Islander

Name _____ Grade in 12-13 _____ Date of Birth _____

Place of Baptism _____ Place of First Holy Communion _____

Child's Ethnicity: Is this child Hispanic/Latino? _____ Gender: Male Female

If you answered no to the question above, please indicate your child's race by circling the choices below that apply:
Asian/American Indian/Alaska Native/Black/African American/White/Native Hawaiian/Pacific Islander

School(s) Now Attending: _____

School Address: _____

Home phone number: _____ Cell Numbers: _____

Family Email Address: _____

Home Address: _____

Father's Place of Employment: _____

Occupation: _____ Religion: _____ Place of Birth: _____

Citizenship: _____

Mother's Place of Employment: _____
Occupation: _____ Religion: _____ Place of Birth: _____
Citizenship: _____ Mother's Maiden Name: _____

Has your family applied to the school before? ____ Yes ____ No; If yes, when? _____

Has an academic or psychological evaluation been made of your child(ren)? ____ Yes ____ No
If yes, please enclose a copy of test results.

Has your child(ren) been tested for a learning disability? ____ Yes ____ No
If yes, please enclose a copy of test results.

Does your child(ren) have any serious allergies that we should be aware of Yes ____ No ____
If yes, please list _____

Children live with: Both parents ____ Mother ____ Father ____ Other ____
If divorced, legal custody of children is assigned to: Both parents ____ Mother ____ Father ____

How did you learn of our school?

The following information must be enclosed with the application for each student:

- Birth Certificate
- Baptismal Certificate
- Social Security Card
- Recent report card and the previous two years report cards
- Standardized test scores (grades 2-8)
- Psychological test results (if applicable)
- Student Health Forms (Gold/Yellow form) upon acceptance
- Certificate of Immunization (Blue form) upon acceptance

I acknowledge that I have completed the application, student enrollment and medical information forms to the best of my knowledge. If any information changes I will notify the school office in writing as soon as it occurs.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

For Office Use Only : Date Received _____ Accepted _____
Checked Parish Status _____ Date _____ Initials _____



NEW PARENT QUESTIONNAIRE 2012-2013 SCHOOL YEAR

FAMILY NAME: _____

(Please complete *** questions per child, making copies if needed. Feel free to use the back side).

Child's Name: _____ Age: _____

In answering the following, please describe your child as objectively as you can:

***What do you perceive are his/her strengths and weaknesses as you see your child at home and as a student at school?

***Describe any circumstances of which the school should be aware.

***What do you envision the school providing for your child?

How would you describe your family life?

What is your parenting philosophy, particularly as it applies to discipline?

How did you come to know about Assumption Catholic School?

Are you able to volunteer in your child's class? _____ Yes _____ No

Name of Parent Completing this Form:
