



Student Application

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Date of Application _____

Grade Applying For _____

Birth Certificate # _____

Child's Information

Name _____
Last First Middle

Date of Birth _____ Place of Birth _____

Address _____ City _____ State _____ Apt# _____ Zip _____

Phone _____ Cell # _____ Primary language spoken at home _____

Gender _____ Religion _____ Parish _____

Sacrament	Date	Church	Location
Baptism (certificate required)			
Reconciliation			
First Holy Communion			
Confirmation			

Child resides with _____ Relationship _____

Mother's Information

Please circle

Single

Married

Separated

Divorced

Deceased

Name _____
Last First Maiden

Address _____ City _____ State _____ Apt# _____ Zip _____

Birthplace _____ Religion _____ Occupation _____

Business Address _____ Email _____ Phone _____ Cell# _____

Father's Information

Please circle

Single

Married

Separated

Divorced

Deceased

Name _____
Last First

Address _____ City _____ State _____ Apt# _____ Zip _____

Birthplace _____ Religion _____ Occupation _____

Business Address _____ Email _____ Phone _____ Cell# _____



Student Application

<p>Custody of Child (if applicable)</p> <p>Custodial Parent _____ <small>Relationship</small></p> <p>Documentation _____</p> <p>Date provided _____</p>	<p>Guardianship of Child (if applicable)</p> <p>Guardian _____ <small>Name</small></p> <p>Relationship _____</p> <p>Documentation _____</p> <p>Date provided _____</p>
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Child's Education			
Previous schools attended			
Name	Address	Grades Completed	Dates
<p>Child has been evaluated by the district Committee on Special Education. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Child has been evaluated by a private psychological or educational agency. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If answer to either or both statements above is YES, applicant must complete the following:</p>			
Type of Evaluation	Date of Evaluation	Name of Agency	Contact Name and Phone
Educational			
Psychological			
Speech			
Other _____			
<p>If child has been seen by the public district Committee on Special Education, applicant must complete the following:</p> <p>1. Was an IEP ever generated? <input type="checkbox"/> Yes <input type="checkbox"/> No Copy Submitted _____ <small style="margin-left: 200px;">Date</small></p> <p>2. Child has a Section 504 Accommodation Plan. <input type="checkbox"/> Yes <input type="checkbox"/> No Copy Submitted _____ <small style="margin-left: 200px;">Date</small></p>			
District Name and #	Date of most recent IEP	Date of Last Psychological Evaluation	Classification and Recommended Placement

I affirm that that the above information is true to the best of my knowledge. I understand that failure to provide the required documentation stops the application process. Furthermore, should my child be accepted/admitted under false, incomplete or negligent information, my child will be dismissed from the school. I also agree that should my child be accepted/admitted, my child and I will be bound by the terms and conditions of the school's parent/student handbook including those provisions referencing inoculations. Final acceptance is also dependent on all fees being paid in full to previous school. Acceptance notices will be mailed.

Signature of Parent or Guardian _____	Date: _____
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**ANNUNCIATION SCHOOL Kindergarten through Grade 7
Sibling Supplemental Application for September 2010**

Please list siblings in Annunciation _____

Has your child ever been retained? ____ (yes) ____ (no)

If yes, what grade? _____

Has your child ever been tutored? ____ (yes) ____ (no)

If yes, what grade level? _____ What subject? _____

Does anyone read to your child at home? ____ (yes) ____ (no)

What types of books does your child read? _____

Does your child read independently? ____ (yes) ____ (no)

How much does your child read per day? _____

How much TV does your child watch? _____

How much time does your child spend on computer? _____

What interests (sports/hobbies) does your child have? _____

For Office Use Only

\$40 Applic. Fee rec'd _____

\$120 Reg. Fee rec'd _____

\$300 Student Fee rec'd _____

Tuition Catholic _____

Tuition Non-Catholic _____

Comments: _____

FOR KINDERGARTEN ONLY

PLEASE CHECK ALL THAT APPLY:

- | | | |
|---------------------------------|-----------------------------|-------------------------------|
| ____ CAN DRESS SELF | ____ UNDERSTANDS ENGLISH | ____ KNOWS SHAPES |
| ____ TOILET TRAINED/NO Pull ups | ____ SPEAKS ENGLISH | ____ KNOWS COLORS |
| ____ USES EATING UTENSILS | ____ SPEAKS CLEARLY | ____ CAN HOLD CRAYON/PENCIL |
| ____ CAN ZIPPER JACKET/COAT | ____ TALKS IN SENTENCES | ____ CAN DRAW A STRAIGHT LINE |
| ____ CAN GO UP AND DOWN STEPS | ____ PLAYS WELL WITH OTHERS | ____ SHARES WITH OTHERS |

Is there any medical condition (asthma, diabetes, other) that the school should be aware of?

____ (yes) ____ (no)

If yes, please explain: _____

Please explain why you would like your child to attend Annunciation

You must attach copies of your child's birth certificate, baptismal certificate (if catholic), record of immunization, current report card, last year's report card, standardized test scores. (if applicable) Your child's admission will be considered upon verification of all information contained in this application. Testing may be necessary, and the principal of your child's current/former school may be contacted. The \$40.00 (cash or money order) application fee is non-refundable.

Please note: Annunciation will contact you regarding an appointment for an interview. You must bring your child with you.

There is a \$100.00 NON-REFUNDABLE REGISTRATION FEE per family.
LATE REGISTRATION for application received after April 15, 2010 is \$200.00 per family.
The Home School Association fee is \$20 per family.
Please contact the school immediately with any change to address or telephone numbers.

By signing below, I certify that all of the information I have provided on this application is true, and there are no outstanding balances with my child's current/former school. If my child is invited to register at Annunciation School, and I choose to register, I agree to abide by all of the rules and regulations as outlined in the Parent/Student Handbook.

Date of Application

Parent Signature