



St. Viator Elementary School

We believe in excellence in education.

NEW STUDENT APPLICATION FOR ADMISSION

ADMISSIONS PROCESS

Please submit the following items for admission review.

- A completed Application for Admission form for each child applying to St. Viator Elementary School
- A copy of the child's Birth Certificate, not a hospital certificate
- A copy of Baptismal Certificate for any religion, if not baptized please note this on the form
- For transfer applicants, grades K - 8th, a copy of current report card from previous school must be included
- Non-refundable application fee of \$100 per student

PRIORITY ENROLLMENT ADMISSIONS CRITERIA

All students who complete the application process are considered for acceptance. However, we cannot guarantee enrollment to all who apply. If enrollment requests exceed availability the following criteria will apply:

- Returning students will receive priority, PreK - 8th if application is submitted prior to priority deadline.
- Siblings of current & returning students will receive priority, if application is submitted prior to priority deadline.
- Enrollment will be determined by the St. Viator Elementary School administration based on the individual circumstances of enrolling students and families.
- Current academic information (student grades, attendance, tests scores, IEP's or 504 Plans) are all taken into consideration when reviewing applicants that are transferring from a different school.
- We strive to maintain a diverse community of students and families with a strong commitment to our school and our mission.

Non-Discrimination Policy

St. Viator School admits students of any race, color, sex, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students. The school does not discriminate on the basis of race, color, sex or national and ethnic origin in the administration of its educational policies, admissions policies, scholarship and loan programs or athletic and other school related programs.



APPLICATION Please complete one for each child

Academic Year _____ (ex: 2016—2017)

School Hours: Full Day 7:50 – 3:00 Half Day 7:50 – 11:00

Please choose one: New Family _____ Current Family/New Student _____

Applying for Grade:

PK3 3 Day Full Day PK3 3 Day Half Day PK3 5 Day Full Day PK3 5 Day Half Day PK4 Full Day PK4 Half Day
If you register for half day, your child may be placed in a combined PK3/PK4 classroom.

Grade _____ If a new family, a copy of most recent report card should be attached to this application

STUDENT INFORMATION

Student Name (Last, first, middle) _____

Prefers to be called _____

Male _____ Female _____

Date of Birth (Month/Day/Year) _____

Place of Birth (City/State/Country) _____

Student's address - Street _____

City _____

State _____

Zip Code _____

Home Phone number (if applicable) _____

Health Conditions (Allergies, etc.) _____

List All Medications _____

Last School Attended (if applicable) _____

Grade _____

Reason for Transfer (if applicable) _____

Public School Nearest Your Home _____

Does/has student received Special Education Services? Reading Math Speech Other: _____

Does student have an IEP? Yes No **If yes, information should be attached to this application**

Student's Ethnic/Racial Background:

- American Indian or Alaskan Asian Black or African-American Hispanic or Latino
- Native Hawaiian or Other Pacific Islander White Two or more races

Languages spoken at home _____

Student's Religion _____

Parish, Church, or Place of Worship _____

City/State _____

Baptism Date _____

Parish, Church, or Place of Worship _____

City/State _____

First Communion Date _____

Parish, Church, or Place of Worship _____

City/State _____

Confirmation Date _____

Parish, Church, or Place of Worship _____

City/State _____

FAMILY INFORMATION

FATHER Mr. Dr.

▲ NAME

▲ ADDRESS if different from applicant

▲ CELL PHONE

▲ WORK PHONE

▲ EMAIL

▲ EMPLOYER

▲ OCCUPATION

▲ RELIGION

▲ PLACE OF BIRTH

▲ DATE OF BIRTH

Alum of St. Viator School. Year of Graduation: _____

MOTHER Mrs. Ms. Miss Dr.

▲ NAME

▲ ADDRESS if different from applicant

▲ CELL PHONE

▲ WORK PHONE

▲ EMAIL

▲ EMPLOYER

▲ OCCUPATION

▲ RELIGION

▲ PLACE OF BIRTH

▲ DATE OF BIRTH

Alum of St. Viator School. Year of Graduation: _____

Mother's Maiden Name: _____

Parental Status: Married Separated Divorced Single Parent Father Deceased Mother Deceased

If father remarried, Stepmother's Full Name _____

If mother remarried, Stepfather's Full Name _____

▲ If parents are divorced, who has legal custody? _____

▲ Custody Restrictions if any _____

▲ Who will receive grades, reports, weekly information and mailings? _____

SIBLING INFORMATION

▲ Sibling's Full Name

▲ Birthdate

▲ Current School

▲ Grade

▲ Sibling's Full Name

▲ Birthdate

▲ Current School

▲ Grade

▲ Sibling's Full Name

▲ Birthdate

▲ Current School

▲ Grade

▲ Sibling's Full Name

▲ Birthdate

▲ Current School

▲ Grade



TUITION AND FINANCIAL AID

Are you a registered parishioner of St. Viator? Yes _____ No _____

PERSON(S) RESPONSILBE FOR FEES AND TUITION:

FATHER MOTHER BOTH OTHER - *Please fill in information below*

▲NAME

▲RELATIONSHIP

▲ADDRESS

▲PHONE NUMBER

St. Viator is committed to making financial aid available to new and returning students as needed. Application for admission to St. Viator should not be discouraged because of affordability of tuition, we believe in giving every child the opportunity to receive a high-quality Catholic education. To be considered for financial aid you must apply through FACTS either online at:

<https://online.factsmgt.com/SignIn.aspx?ReturnUrl=%2f>

or through the mail. Paper forms are available upon request from the school office.

Will you be applying for financial aid? Yes No

How did you hear about St. Viator?

Why do you want your child to attend St. Viator?

What are your most important considerations in choosing a school?

I (we) hereby state that the information contained herein is true and complete. I (we) have not knowingly omitted any information regarding my (our) child.

▲ Father's Signature

▲ Date

▲ Mother's Signature

▲ Date

<p>For office use</p> <p>Date received _____ Amount paid _____</p> <p>Check # _____ Cash _____ Receipt Given _____</p> <p>Family ID _____ Student ID _____</p>	<p>Acceptance letter sent: _____</p> <p>Acceptance Retd: _____</p> <p>\$50.00 Acceptance Fee</p> <p>Check# _____ Cash _____ Receipt Given _____</p>
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