



 **ST. ANN
SCHOOL**

APPLICATION FOR ADMISSION

Thank you for choosing St. Ann School!

APPLICANT INFORMATION *Please complete one form for each child applying. Thank you.*

Applying For Grade (Specify Grade): _____ or: 3 year-old/4-year old PreK Kindergarten Academic Year: _____

Student's Name: _____ Gender: Male Female
last, first, middle

Date of Birth: _____ Place of Birth: _____ Catholic Non-Catholic
city, state or country

Race: *Please check all that apply / Optional*

- Native American Indian or Alaskan Asian Black or African American Latino Middle Eastern
 White Native Hawaiian or other Pacific islander Two or more races

Medical or surgical conditions we should be aware of: yes no If yes, please explain: _____

Learning needs we should be aware of: yes no If yes, please explain: _____

FAMILY INFORMATION

Primary Email: _____ Primary Phone: _____
for use during the admissions process

Are you a registered St. Paul Parishioner? yes no If no, name of current church: _____

Mother/Guardian Name: _____ Maiden Name: _____

Email: _____ Preferred Language: _____

Current Address: _____ City/State: _____

Zip: _____ Cell #: _____ Work Phone: _____

Alumni to St. Ann's? yes no What Year? _____

Father/Guardian Name: _____

Email: _____ Preferred Language: _____

Current Address: _____ City/State: _____ Zip: _____

Zip: _____ Cell #: _____ Work Phone: _____

Alumni to St. Ann's yes no What Year? _____

Home Status: *Check all that apply* Married Parents Divorced Single Parents Separated Parents Living Together
 Mother Deceased Father Deceased

Custodial Guardian is: Birthparents Mother Father Step-Father Step-Mother Grandparent Other: _____

SACRAMENTS: *(School will need copies of Baptismal and First Communion certificates for new students.)*

Baptismal information _____
if applicable/ date, church, city and state

First Communion Information _____
if applicable/ date, church, city and state

Confirmation Information _____
if applicable/ date, church, city and state

Has your child ever attended Religious Education classes? yes no If so, how many years? ____ Where? _____



SIBLING INFORMATION

1. Sibling's Full Name _____ Age _____ Grade _____ Current School _____
(if applicable)
2. Sibling's Full Name _____ Age _____ Grade _____ Current School _____
(if applicable)
3. Sibling's Full Name _____ Age _____ Grade _____ Current School _____
(if applicable)

EDUCATIONAL HISTORY INFORMATION

Student's Current School/Preschool/Daycare _____ Current Grade _____
Dates Attended _____ School's Address _____
Please include Street, City, State & Zip Code

Has your child been retained? yes no If yes, what grade(s): _____
If your child was not attending St. Ann, what Public School would they be attending? _____

PERMISSIONS

On occasion St. Ann School uses photos and/or academic work of students/parish publications to share information about the school. School publications include, but are not limited to: the website, social media, school yearbook, student academic work, advertisements, annual reports, posters, newsletters, parish bulletins and other public relations material. In addition, local news organizations or community partners such as the Big Shoulders Fund may hear of our activities or events, and our school may invite or allow them to photograph or record our events.

Please check below:

- My child's photo or academic work may be published in any format including group or individual photos.
 My child's photo or academic work may **NOT** be published in any format including group or individual photos.

This form will remain in effect until the parent/guardian requests a change in writing.

SUBMISSION

- Original Birth Certificate Non-refundable \$75 enrollment fee *per family*
 Non-refundable \$175 after March 1st Copy of the most recent report card *(for grades 1-8 only)*

How did you hear about St. Ann School: *Please check all that apply*

- Returning from previous year Church Bulletin Website/Internet Live in Neighborhood Word of mouth
 Flyer in another parish *(please specify)* _____ Other: _____

If a current family in the school recommended you, please give their name: _____
They will receive \$500 off their tuition for this recommendation.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

St. Ann School does not discriminate on the basis of sex, race, color, or national origin in the administration of admissions and educational policies, financial aid, or other school-related activities. Demographic information (e.g. race) is requested for Archdiocesan reporting purposes. It is not used in the admission decision.

COMPLETING THIS FORM IS NOT A GUARANTEE OF ACCEPTANCE

If after reviewing your child's records we recognize an inability to serve your child's needs, you will be notified, and your enrollment fee will be returned.

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