ST. MARY'S SCHOOL

St. Mary's Catholic School

730 S. Cedar Avenue. Owatonna, MN 55060 (507) 446-2300, Fax: (507) 446-2304

2018-2019 KINDERGARTEN READINESS APPLICATION

FAMILY INFORMATION:

Father/Guardian #1

Mr._____
Last *First*

Address:_____

_____

Home Phone: (_____) _____ - _____

Occupation:_____

Employer:_____

Work Phone: (_____) _____ -_____

Cell Phone: (_____) _____ - _____

E-mail Address:_____

Religion:_____

Parish:_____

Mother/Guardian #2:

Mrs._____
Last *First*

Address:_____

_____

Home Phone: (_____) _____ - _____

Occupation:_____

Employer:_____

Work Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____

E-mail Address:_____

Religion:_____

Parish:_____

INFORMATION VERIFICATION

We cannot enroll your child unless the application is complete and signed. Thank you.

_____ I've included the $25 per family application fee.

_____ I've attached a copy of the student's Birth Certificate

Option C will be used for St. Mary's School tuition collection. This program allows us to streamline our process and allow you the ability see your account information on-line and make payments.

ST. MARY'S STUDENT REGISTRATION:

Student 1: Name:_____
Last ***First*** ***Middle***

2018-2019 Grade Entering: Kindergarten Readiness Student's Date of Birth: _____/_____/_____ Gender:_____

Name & location of previous school or daycare:_____

Has this child ever been on an IEP or 504 Plan? ___Yes ___No

Does this child have any special physical or medical needs? ___Yes ___No

Does this child have an special social or emotional needs? ___Yes ___No

Applicants may be asked to provide additional information or records to the school before an admissions decision is made.

Student's Race/Ethnicity (for statistical purposes only) a.) Is this student of Latin/Hispanic ethnicity? _____ Yes _____ No

b). Race: ___American Indian ___Asian ___Black/African-American ____Pacific Islander ____White/Caucasian

Language(s) spoken at home: _____

The student lives with: ____Both Parents ____Mother ____Father ____Stepmother ____Stepfather ____Other (Specify):_____

In any situation where there is a custody agreement, the parents MUST provide St. Mary's with the portion of that agreement that stipulates custody and any other information pertinent to the school. This requirement is a condition of enrollment. In the case of divorce or separation, please indicate the custodial parent for each child.

St. Mary's School correspondence should be sent to: ____ both ____mom ___dad

Other Child(ren)'s Name in Household	**Grade**

How did you hear of St. Mary's School? _____

TUITION RATES

# Students	Annual
1	$4,206

Tuition payments due the 1st of each month, June 2018-May 2019.

Total Tuition amount due for the 2018 – 2019 School Year: $_____

REGISTRATION DEPOSIT & AGREEMENT

Each family must submit a $25 non-refundable deposit in order to complete the registration process. The registration fee is not refunded if the family chooses to withdraw the application.
Families should return all registration forms and fees together to:

St. Mary's School
730 S. Cedar
Owatonna, MN 55060

We, the undersigned, certify that the information provided in this enrollment application is accurate and complete. St. Mary's School retains the right to cancel enrollment at any time if this application contains false or misleading information. Upon admission to St. Mary's School, we agree to comply with all the rules and regulations as set forth of St. Mary's School. In addition, we agree to cooperate and assist the administration, faculty, and staff in promoting the integrity and high spiritual, moral, and academic standards set forth by St. Mary's School. We acknowledge that St. Mary's School reserves the right to cancel enrollment at any time for reasons of academic, moral, or character deficiency as well as any actions detrimental to the Diocese of Winona, or the faculty, administration, staff, facilities, student body, and name of St. Mary's School.

We have received a copy of and agree to abide by the "Tuition, Scholarships, and Financial Guidelines for 2018-2019". Upon admission the guardian(s) signing below accept financial responsibility for all tuition, pledges, fees, and charges on behalf of the named students. It is our obligation to make timely payments and we understand that late charges may be assessed to accounts.

The Signatures of both parents are required. In the case of divorce or separation, the parent (s) signing below accept full financial responsibility.

_____ Parent/Guardian Signature Date

_____ Printed Name

_____ Parent/Guardian Signature Date

_____ Printed Name

**No child will be discriminated against because of race, color, national origin, sex, disability, age and reprisal/retaliation for prior Civil Rights activity. This institution is an equal opportunity provider.*

Office Use-Information Verification

Administrator's Signature:_____

_____ $25 Application Fee per Family

_____ Copy of child(ren)'s birth certificate

_____ Tuition payment plan

_____ Scrip Account

_____ Request for Records