

## 2017-2018 NEW FAMILY APPLICATION

*This form is for families who are NEW to St. Mary's School.  
Current Families should complete the TADS Application*

### **FAMILY INFORMATION:**

#### **Father/Guardian #1**

Mr. \_\_\_\_\_  
*Last*
*First*

Address: \_\_\_\_\_  
 \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Religion: \_\_\_\_\_

#### **Mother/Guardian #2:**

Mrs. \_\_\_\_\_  
*Last*
*First*

Address: \_\_\_\_\_  
 \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Religion: \_\_\_\_\_

Student's Siblings	Grade	Gender M/F	Birth Date	Primary Language

### **REGISTRATION DEPOSIT & AGREEMENT**

Each family must submit a \$50 non-refundable deposit in order to complete the registration process. The registration fee is not refunded if the family chooses to withdraw the application.

**FINANCIAL AID:** Families must submit the registration form and fee before an application for financial aid can be considered.

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 2017-2018". 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

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Printed Name

# STUDENT INFORMATION

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

**Student 1 : Name:** \_\_\_\_\_  
**Last** **First** **Middle**

2017-2018 Grade Entering: \_\_\_\_\_ Student's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: \_\_\_\_\_

Name & location of previous school: \_\_\_\_\_

Has this child ever been on an IEP or 504 Plan?  Yes  No

Has this child ever received Title I services?  Yes  No

Has this child every been in a gifted and talented program?  Yes  No

Has this child ever been suspended or expelled from any school?  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

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

The student lives with:  Both Parents  Mother  Father  Stepmother  Stepfather  Other (Specify): \_\_\_\_\_

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

**Student 2 : Name:** \_\_\_\_\_  
**Last** **First** **Middle**

2017-2018 Grade Entering: \_\_\_\_\_ Student's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: \_\_\_\_\_

Name & location of previous school: \_\_\_\_\_

Has this child ever been on an IEP or 504 Plan?  Yes  No

Has this child ever received Title I services?  Yes  No

Has this child ever been in a gifted and talented program?  Yes  No

Has this child ever been suspended or expelled from any school?  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

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

The student lives with:  Both Parents  Mother  Father  Stepmother  Stepfather  Other (Specify): \_\_\_\_\_

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

**Please attach additional forms if applying for more than two children.**

**Office Use-Information Verification**

Administrator's Signature: \_\_\_\_\_

<input type="checkbox"/> \$50 Application Fee per Family	<input type="checkbox"/> Transportation form
<input type="checkbox"/> Copy of child's birth certificate	<input type="checkbox"/> Request for Records
<input type="checkbox"/> Food Service Account Established	<input type="checkbox"/> Tuition payment plan through TADS
<input type="checkbox"/> Family ID# _____	
<input type="checkbox"/> Scrip Account	

## **MATERIALS AND SERVICES**

The State of Minnesota authorizes local public school districts to provide services/materials to nonpublic students at no extra charge. These services/materials must be requested for each student each year in order to receive funding from the State of Minnesota. This funding is *significant to St. Mary's School budget* with no additional charge to the student's family.

Please circle any service you refuse:

Textbooks/Materials

Health Service

Guidance/Counseling

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

**FINANCIAL ASSISTANCE**: If you would like to apply for financial assistance, see [www.tads.com](http://www.tads.com)

## **INFORMATION VERIFICATION**

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

\_\_\_\_\_ I've included the \$50 per family application fee. (New Families only)

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

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **PARISHIONER – TUITION RATES**

# Students	Annual	Semi-Annual	Monthly
1	\$3,816	\$1,908	\$318
2	\$5,796	\$2,898	\$483
3	\$7,560	\$3,780	\$630
4	\$9,576	\$4,788	\$798
5	\$10,236	\$5,118	\$853

## **NON-CATHOLIC/NON PARISHIONER – TUITION RATES**

#Students	Annual	Semi-Annual	Monthly
1	\$4,416	\$2,208	\$368
2	\$6,660	\$3,330	\$555
3	\$8,628	\$4,314	\$719
4	\$10,932	\$5,466	\$911

Total Tuition amount due for the 2017 – 2018 School Year: \$ \_\_\_\_\_

You will receive an email from TADS explaining how to complete your enrollment online. The TADS Tuition Management Program will be used for St. Mary's School tuition collection. This program allows us to streamline our process and allow you the ability to see your account information on-line and make payments.

\*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.