

Saint Catherine's Preschool Application Form 2017-2018

TO BE FILLED OUT BY OFFICE:

Date Received: _____

Student Control # _____

Teacher _____

Room # _____

Birth Certificate _____ Y _____ N

Immunization Records _____ Y _____ N

Baptismal Record _____ Y _____ N

(Recent Photo of Child)

STUDENT INFORMATION:

Students Name: _____

Name Child Goes By: _____

Student Birthdate: _____ Age As Of 9/01/17 _____ Male () Female ()

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Family Information *(Please check ALL appropriate categories.)*

Lives with Mother and Father () Parents Divorced or Separated () Other ()

Lives with Father () Father remarried ()

Lives with Mother () Mother remarried ()

*Does the parent with whom the child does not live have any Court Restrictions placed on his/her Parental Rights? _____

If so, please explain:

PLEASE SUBSTANTIATE THESE ITEMS BY ATTACHING A COPY OF THE COURT ORDER/DIVORCE DECREE TO THIS FORM.

Mother's Name: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Father's Name: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Emergency Contact: Name: _____
Phone # _____
Relation: _____

The following people have my permission to pick up my child:

Name: _____ **Relation:** _____

Car Type/Color: _____

Name: _____ **Relation:** _____

Car Type/Color: _____

Child's Doctor: _____ **Phone:** _____

MEDICAL OR FOOD ALLERGIES: _____

Are you an Active St. Catherine's Parishioner? Yes: _____ **No:** _____

If yes, what year did you register at St. Catherine of Siena? _____

Name parish ministries that you are currently active in: _____

If no, what parish are you a member of? _____

Is your child currently enrolled in another preschool? Yes: _____ **No:** _____

If yes, what is the name of the preschool? _____

Has your child ever been tested for a speech, language, learning or behavior difficulty?
Yes ___ **No** ___ **If yes, please attach a copy of the assessment.**

Have you previously had a child at Saint Catherine’s Preschool? Yes: _____ No: _____

Do you have a child currently enrolled or are registering a child at Saint Catherine of Siena Catholic School? Yes: _____ No: _____

****All children entering the 3, 4, or 5 year old programs must be potty trained by September 1, 2017. There will be no exceptions to this policy.****

**This application is not a contractual agreement between the above party and Saint Catherine’s Preschool that your child is enrolled in Saint Catherine’s Preschool.

**Also note only applications filled out in their entirety will be accepted and considered for admissions.

All preschool tuitions are handled through FACTS Tuition Management Company as a direct withdrawal from your account. Completion of this FACTS form is required upon your acceptance of registration and will be available in the preschool office. All enrolled families for the 2017-2018 school year will be required to make a \$250.00 family tuition deposit by May 5, 2017. This amount will be deducted from your total tuition balance, and withdrawn through the FACTS payment system. Remaining tuition balance will be paid in equal monthly installments beginning July 2017 and ending March 2018.

All fees, registration, resource, and family tuition deposit are non refundable.

Before entering upon an agreement of admission, each family will be asked to sign the following Parent Partnership Agreement. As part of this agreement, families may be interviewed and are asked to tithe at least 10 hours per year back to our St. Catherine of Siena community. All ministries of St. Catherine of Siena community that you are actively involved in will count towards your 10 hours.

PARENT PARTNERSHIP OF FAITH

I understand that by entering this agreement, I agree to fully embrace the mission of Saint Catherine of Siena and intend to enter into full partnership with our parish faith community as a responsible steward and disciple of Christ by generously giving of my time, talent, and treasure.

I also understand that failure to embrace full partnership may have a bearing on future enrollment for my child in Saint Catherine’s Preschool and/or Saint Catherine’s School.

Parent’s Signature: _____

Date: _____

CLASSES OFFERED FOR FALL 2017

Please check classes by printing "1" by your first choice and "2" by your second choice.

<u>CLASS NAME / AGE</u>	<u>DAYS OF THE WEEK</u>	<u>MARK "1" OR "2"</u>
Wee Two's(9:00-12:00).....Monday/Wednesday August – December (9:00-12:00), January – May (9:00 – 1:00)		_____
(3 Day) Young 2's(9:00-1:00).....Monday/Wednesday/Friday		_____
(4 Day) Older 2's(9:00-1:00).....Monday – Thursday		_____
(3 Day) Older 2's(9:00-1:00).....Monday/Wednesday/Friday		_____
(5 Day) 3's(9:00 – 1:00).....Monday – Friday		_____
(4 Day) 3's(9:00 – 1:00).....Monday - Thursday		_____
(3 Day) 3's(9:00 – 1:00).....Monday/Wednesday/Friday		_____
(4 Day) K-4's(9:00 – 1:00).....Monday – Thursday		_____
(5 Day) K-4's(9:00 -1:00).....Monday – Friday		_____
(5 Day) Early Fives (9:00 -1:00).....Monday – Friday		_____
(5 Day) Early Fives (9:00 -1:00).....Monday – Friday With "Five Alive" when they turn 5 (Extended Day 8-3) Monday-Friday		_____

Do you need to coordinate your class days with a sibling? _____Y _____N

Name of sibling: _____

Age/class sibling is enrolled in: ____Wee 2 ____2 ____3 ____ K-4 ____ 5's

Please place a (*) by the correct response:

_____ **Member of Saint Catherine of Siena Catholic Church**

_____ **Catholic & Non-Member of Saint Catherine of Siena Catholic Church**

_____ **Non-Catholic and Non-Member of Saint Catherine of Siena Catholic Church**

To be filled out by office:

Registration Fee Paid ____Y ____N	Check # _____	Amt Paid \$_____	Date Paid _____
Resource Fee Paid ____Y ____N	Check # _____	Amt Paid \$_____	Date Paid _____
Cash \$_____			

**** The FACTS tuition payment schedule for the 2017-2018 school year will begin on July 2017 ending March 2018.****

****Saint Catherine's Preschool does not have the staff, materials or equipment to provide adequate instruction for students with significant special needs.**

Saint Catherine's Preschool Application Process

- Complete the application form.
- If applying for more than one child, you must complete an application for each child.
- Sign and return to the Preschool office by February 10, 2017.

After currently enrolled students and their siblings have completed registration, remaining positions will be filled from the applications received.

Criteria used are as follows:

- Currently enrolled students and their siblings.
- Legacy students – siblings of students who previously attended St. Catherine's Preschool
- Students of active parishioners of St. Catherine's Parish.
- Siblings of students of St. Catherine of Siena Catholic School.
- Students of active parishioners of other parishes in the Archdiocese of Atlanta.
- Catholics transferring from other dioceses.
- Outside community students.

All decisions are made final by the Pastor of Saint Catherine of Siena Catholic Church.

Written notification of acceptance and tuition rates, registration and resource fee amounts will be given by mail beginning Monday, February 27, 2017.

After receiving your notification of acceptance, confirmation and registration/resource fees must be received by March 6, 2017 to secure your child's position in the preschool. Cash, check or credit cards can be accepted at the time of registration. There is a 3% fee for those using credit cards.

Required documents, photo copies of birth certificate, immunization record, and baptismal certificate may be turned in at this time. Copies can be made here at the preschool office. If these documents are not available to you at this time, you may send them in at a later date.

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St. Catherine's Preschool Parent Handbook is available on our website, www.scspreschool.org.

Please keep this page for your records.