

**ST. BARTHOLOMEW CATHOLIC SCHOOL**  
"SHARING, LEARNING AND GROWING IN CHRIST"

**APPLICATION FOR ADMISSIONS**  
**2010-2011**

(Please print or type)

Application Date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

**SECTION A: APPLICANT**

Applicant's Name: \_\_\_\_\_  
First Middle Last

Home Address: \_\_\_\_\_  
City State Zip Code

Person with whom the applicant resides: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Gender: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

**MEDICAL INFORMATION**

Physician's Name: \_\_\_\_\_

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

Hospital where student should be taken if parent is unavailable? \_\_\_\_\_

Does the child have any illnesses or allergies the school needs to be made aware of? If yes, please list and explain. \_\_\_\_\_

Please list any medications the student is taking. \_\_\_\_\_

CITIZENSHIP

Is the applicant a U.S. citizen? YES NO

If not, please answer the following:

Does the applicant have a Visa? YES NO

(Specify Type of Visa Issued) \_\_\_\_\_

Will the applicant require an I-20-A-B? YES NO

If the applicant is a transfer student, has an I-20-A-B been issued by the previous school? YES NO

If so, present the I-20-A-B, D copy and give the applicant's admission #: \_\_\_\_\_

**SECTION B: APPLICANT'S EDUCATION**

Please give the name and address of the school the applicant is currently attending:

\_\_\_\_\_  
Name of School Address City State Zip Code

Grade: \_\_\_\_\_ Attended From \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_  
Name of Principal

Educational Program: General \_\_\_\_\_ Specialized (provide documentation) \_\_\_\_\_

Reasons for leaving current school: \_\_\_\_\_

School or schools previously attended by applicant:

\_\_\_\_\_  
Name of School Address Years Attended

\_\_\_\_\_  
Name of School Address Years Attended

REFERENCES

Please provide two references.

\_\_\_\_\_  
Name Telephone

\_\_\_\_\_  
Name Telephone

**SECTION C: RELIGION**

Catholic YES NO

If Catholic, provide the following information?

Parish Name: \_\_\_\_\_ Envelope # \_\_\_\_\_

Has the applicant received any of the Sacraments of Initiation? YES NO

Baptism: \_\_\_\_\_  
Date Church Country

First Communion: \_\_\_\_\_  
Date Church Country

Confirmation: \_\_\_\_\_  
Date Church Country

**SECTION D: FAMILY INFORMATION**

Parent's Marital Status: Married: \_\_\_\_\_ Single: \_\_\_\_\_ Divorce: \_\_\_\_\_

If divorced, please provide a copy of the Divorce Decree.

**FATHER**

\_\_\_\_\_ Title First Middle Last

\_\_\_\_\_ Home Address (if different from applicant) City State Zip Code

\_\_\_\_\_ Home Telephone Cellular E-mail

\_\_\_\_\_ Place of Employment Address Telephone

**MOTHER**

\_\_\_\_\_ Title First Middle Last

\_\_\_\_\_ Home Address (if different from applicant) City State Zip Code

\_\_\_\_\_ Home Telephone Cellular E-mail

\_\_\_\_\_ Place of Employment Address Telephone

**GUARDIAN**

Please provide a copy of Guardianship Paperwork

Title	First	Middle	Last		
Home Address (if different from applicant)			City	State	Zip Code
Home Telephone		Cellular		E-mail	
Place of Employment		Address		Telephone	

FINANCIAL RESPONSIBILITY

Please indicate who is financially responsible for the education of this child and provide the legal documents:

Name	Relationship
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**SECTION E: ADMISSIONS AGREEMENT**

As the signers of this Admissions Form, the parents/guardians understand that:

- ✚ Tuition payments are due on the first of the month. Failure to pay can result in your child being prohibited from attending school.
- ✚ All school fees are non-refundable.
- ✚ The cooperation of family and school is essential to the student's education. The student and family will therefore adhere to the administrative and disciplinary policies of St. Bartholomew Catholic School and the Archdiocese of Miami.
- ✚ The family will support St. Bartholomew Catholic School through participation in the fundraising and service hours requirement.
- ✚ The family will assist in the child's academic and spiritual growth.
- ✚ Current student information and records will be provided as required by St. Bartholomew Catholic School.
- ✚ The weekly communication folder and agenda will be signed and reviewed.
- ✚ Permission is being granted to St. Bartholomew Catholic School to obtain your child's school records, as well as to contact the references and professionals I have provided to St. Bartholomew Catholic School. In addition, I waive my right of access to confidential assessment and evaluation materials at any time.
- ✚ **A \$ NONREFUNDABLE APPLICATION FEE MUST ACCOMPANY THIS APPLICATION FORM.**

**(Please note that both parents/guardians must sign this form)**

Signature of Parent or Guardian	Date
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Signature of Parent or Guardian	Date
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**St. Bartholomew Catholic School**  
**In Parish Tuition Discount Request**

Date \_\_\_\_\_

Student Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone # \_\_\_\_\_

Envelope # \_\_\_\_\_

**In order to receive an in-parish discount at St. Bartholomew, families must be active contributing parishioners.**

**By signing this form you are acknowledging that your family contributes a minimum of \$75.00 per month or more to our parish.**

**Parent's Signature** \_\_\_\_\_

Verified by Parish Office:

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Pastor Signature: \_\_\_\_\_

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

The following is a list of items that must be turned in when submitting an application:

### Application Check List

- Birth Certificate
- Baptismal Certificate (If Catholic)
- Social Security Card
- Florida State Health Records  
(Blue & Yellow Forms)
- Most Recent Report Card
- Standardized Test Scores
- Signed In Parish Tuition Request  
Form (If Applicable)