

Date Rec'd _____
App. Fee \$ _____
Check # _____

Name _____
Parishioner # _____

***** Office Use *****

St. John Notre Dame School
309 Montrose Dr. Folsom, CA 95630
(916) 985-4129

2012 - 2013
APPLICATION FOR ADMISSION OF
JR. KINDERGARTEN

PLEASE PRINT

Application Fee: **\$25.00 Per Applicant** (Non-refundable)

Child's Full Name _____

Child's Date of Birth _____ Child's Age _____

Address _____
Street City Zip

Home Phone _____ Child's Faith _____

E-mail Address _____

REQUIRED DOCUMENTATION:

Photocopies of all original certificates will be taken at the school office and immediately returned to you.

Immunization Record _____ ***Photo of Child*** _____

Original Birth Certificate _____ **Verified by** _____ **Date** _____

Original Baptismal Certificate _____ **Verified by** _____ **Date** _____

Has your child ever been academically and/or psychologically tested before? Y N If yes, please explain:

Has your child received/or is your child receiving services through a school district or occupational therapy facility, such as speech therapy, etc? Y N If yes, please explain:

Does your child currently receive services as a result of an IEP (Individual Evaluation Plan) through a school district? Y N If yes, please explain:

If Yes to any of the above, please attach any pertinent paperwork to application.

Why are you interested in placing your child in a Catholic school?

Father's Faith _____ Mother's Faith _____

Parish name and envelope # where registered _____
(*Must be supplied to be considered a parishioner*)

Date of Parish registration _____

Are you a SJNDS alumni? Y N If so, year of graduation _____

Home Status: Parents are Married Parents are Separated*
 Parents are Divorced* Parent is Deceased

How long have you lived in this area? _____

Father's Name _____ Occupation _____

Employer _____ Wk. Phone _____

Cell Phone _____

Mother's Name _____ Occupation _____

Employer _____ Wk. Phone _____

Cell Phone _____

*Additional Address: Parent Name _____ Phone # _____

Address

City

Zip

Ethnicity: (For Catholic School Data Information)

- | | | |
|--|-----------------------------------|--------------------------------|
| <input type="checkbox"/> American Indian/Native | <input type="checkbox"/> Asian | <input type="checkbox"/> Multi |
| <input type="checkbox"/> African American | <input type="checkbox"/> Hispanic | |
| <input type="checkbox"/> Native Hawaiian/Pacific | <input type="checkbox"/> White | |

All requested documents must accompany application before further processing.