

Date Rec'd _____

App. Fee \$ _____

Check # _____



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

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

**2022 - 23 APPLICATION FOR ADMISSION OF
NEW KINDERGARTEN STUDENT**

PLEASE PRINT

Application Fee **\$40.00 Per Applicant** (Non-refundable)

Child's Full Name _____

Child's Date of Birth _____

Child's Age _____

Address _____

Street

City

Zip

Home Phone _____

E-mail Address _____

Baptized? Y N

REQUIRED DOCUMENTATION (For Office Use Only)

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** _____

Current/Previous School(s) _____

Have you completed an assessment (academic, speech, psychological, etc.) for your child? Y N

Has your child been found eligible for services through a school district or other school (IEP/ISP)? 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 SJND 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 | |

How did you hear about SJND?

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Palladio Billboard | <input type="checkbox"/> R.E. Flyer | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Style Magazine | <input type="checkbox"/> SJND Website | |
| <input type="checkbox"/> Activities & Pre-School Expo | <input type="checkbox"/> Friend/SJND Family | |

All requested documents must accompany application before further processing.