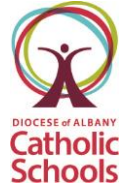




# St. Mary's School

12 Sixth St. Waterford, NY 12188 smswaterford.org



Accredited by AdvancED North Central Association

## Application Form 2017-2018

Date of Application \_\_\_\_\_

\$200.00 non-refundable fee per family is due with this application Check # \_\_\_\_\_

Please Check One:  Pre K- 3  Pre K- 4 AM  Pre K- 4 full 3 day  Pre K- 4 full 5 day  
 Kdg.  Gr. 1  Gr. 2  Gr.3  Gr. 4  Gr. 5  Gr. 6  Gr. 7  Gr.8

(Please fill out page 1 for each child in the family attending St. Mary's School)

**Student Information**  New student  Returning student Date of Birth \_\_\_\_\_

\_\_\_\_\_ Male \_\_\_ Female \_\_\_  
Last name First name Middle name Phone

\_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ Public School District \_\_\_\_\_  
Address

List all school(s) previously attended, including Preschool through current year.  
Grade(s) Name of School(s) Grade(s) Name of School(s)

\_\_\_\_\_  
\_\_\_\_\_

Does this child have an IEP or 504 plan?  Yes (Most current must be provided, new students only)  No

Has your child been evaluated for any behavioral/social/emotional difficulties?  Yes  No

Ethnicity:  American Indian or Alaska Native  Asian  Hispanic  Black or African American  
 White  Multiracial  Native Hawaiian or other Pacific Islander

Citizenship:  US Citizen  Non US-Citizen Social Security # \_\_\_\_\_

Are there court orders pertaining to this child we need to be aware of?  Yes (Please provide most current)  No  
*If not already on file, we need a copy of your child's birth certificate, and if your child was baptized, a Baptismal certificate with this application.*

**Record of Sacraments**

\_\_\_\_\_ City \_\_\_\_\_  
Religion Current Parish

\_\_\_\_\_ City/State \_\_\_\_\_  
Baptism Date Parish

\_\_\_\_\_ City/State \_\_\_\_\_  
First Reconciliation Date Parish

\_\_\_\_\_ City/State \_\_\_\_\_  
First Eucharist Date Parish

<b>Parent/Guardian Information</b>		Relationship to child _____	
_____	_____	_____	_____
Last name	First name	Religion	
Student lives with this parent: <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Joint custody			
_____	_____	_____	_____
Address (if different from student)	City	St	Zip
_____	_____	_____	_____
Email address for school notifications	Home phone	Cell phone	
_____	_____	_____	
Occupation	Employer	Work phone	
_____	_____	_____	

<b>Parent/Guardian Information</b>		Relationship to child _____	
_____	_____	_____	_____
Last name	First name	Religion	
Student lives with this parent: <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Joint custody			
_____	_____	_____	_____
Address (if different from student)	City	St	Zip
_____	_____	_____	_____
Email address for school notifications	Home phone	Cell phone	
_____	_____	_____	
Occupation	Employer	Work phone	
_____	_____	_____	

Please list other children not attending St. Mary's School and the school they do attend if applicable:	
_____	
_____	
<i>I understand my child's records must be received and reviewed, and other admittance requirements met before official acceptance. I have read the policies of St. Mary's School, including but not limited to, the tuition policy, and agree to all conditions as published in the student parent handbook found on the school website.</i>	
_____	_____
<b>Parent Signature</b>	<b>Date</b>

Office Use Only
Application Fee ____
Birth Certificate ____
Baptismal Certificate ____
Health History ____
Immunizations/Physical ____
Records Request ____