



New Student Application for Enrollment

This application form must be submitted for all new students. Families new to the school should include a check for \$110 per child, \$215 for 2 children, and \$300 for 3 or more children payable to St. Mary's Visitation School. This non-refundable fee will be applied to Registration fees.

Part One- Student Information Please Print

Name of Student _____ Sex _____
(Last) (First) (Middle)

Address _____

City, State _____ Zip Code _____

Home Phone _____ Primary E-Mail Address _____

Birth Date _____ Place of Birth _____

Grade Entering in fall, 2018 _____

Ethnic Group-for reporting purposes only, please check most characteristic: ___Alaskan/Native American
___Asian/Pacific Islander ___Black/African-American ___Hispanic ___White/Caucasian/Middle Eastern
___Bi-racial (Specify : _____)

Student's Religion _____

Baptism _____
(Date) (Church) (City, State)

Reconciliation _____
(Date) (Church) (City, State)

First Eucharist _____
(Date) (Church) (City, State)

If the student was previously enrolled at another school, please fill out the information below.

School Name _____ School Phone _____ Date Left _____

School Address _____
(City, State) (Zip Code)

Has your child been evaluated, qualified, or received services for an exceptional education need, (e.g., speech/language, learning difference, etc.)? Yes _____ No _____

If yes, please indicate the program _____

Has your child been recommended/qualified for an Individual Educational Plan (IEP)? Yes _____ No _____

Does your child have any medical restrictions? Yes _____ NO _____

If yes, please list them _____

Please fill out Part Two which is on the back of this form

For School Office Use

Amount \$ _____

Date and Time _____

Check# _____

Part Two- Parent Information

Father's Information

Name _____
(First) (Middle) (Last)

Home Address _____
(City, State) (Zip Code)

Place of Employment _____ Occupation/Position _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____

Religion _____ Are you a registered member of St. Mary's Visitation Parish? ___ Yes ___ No

Parish, if not St. Mary's Visitation _____

St. Mary's Visitation Alumnus? _____ If yes, class year _____

Mother's Information

Name _____
(First) (Middle) (Last)

Home Address _____
(City, State) (Zip Code)

Place of Employment _____ Occupation/Position _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____

Religion _____ Are you a registered member of St. Mary's Visitation Parish? ___ Yes ___ No

Parish, if not St. Mary's Visitation _____

St. Mary's Visitation Alumnus? _____ If yes, class year _____

Who is responsible for tuition? ___ Mother ___ Father ___ Both ___ Other

Marital Status of Parents ___ Married ___ Separated ___ Divorced ___ Single

The child resides with: _____
(Name/s) (Relationship)

Who has legal custody of the child? _____

Language spoken at home _____

Sibling Information

Name _____ Birth date _____ Current School _____

Name _____ Birth date _____ Current School _____

Name _____ Birth date _____ Current School _____

Name _____ Birth date _____ Current School _____

