Good Shepherd Catholic School

Application Form 2019-2020

**Application for Grade:** PK3 PK4 K 1 2 3 4 5 6 7 8 (please circle)

**TO BE COMPLETED BY PARENT OR GUARDIAN DATE OF APPLICATION: \_\_\_\_\_\_\_\_\_\_\_**

Applicant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name First Name Middle Name

Primary Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Primary Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Country

School Applicant Currently Attends \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current Grade \_\_\_\_\_\_\_\_

Applicant’s Religion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the name of the parish you attend and support? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FATHER/STEPFATHER/GUARDIAN**

**(PLEASE CIRCLE ONE)**

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

Last First

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(if different than above)*

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Status (please circle)** Married/ Single/ Divorced/ Deceased

Religion\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MOTHER/STEPMOTHER/GUARDIAN**

**(PLEASE CIRCLE ONE)**

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

Last First

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(if different than above)*

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Status (please circle)** Married/ Single/ Divorced/ Deceased

Religion\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If parents are separated or divorced, who has legal custody of applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who is responsible for tuition and fees? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who should receive all school correspondence?

\_\_\_\_\_\_ Parent/Guardian with whom student lives (primary address)

\_\_\_\_\_\_ Other Please list \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is a language other than English spoken at home? \_\_\_\_Yes \_\_\_\_No (if yes, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_)

Does the applicant have siblings currently attending GSC? \_\_\_\_ Yes \_\_\_\_\_ No

If yes, please provide full names and grades \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you know any families enrolled? \_\_\_\_ Yes \_\_\_\_ No (if yes, which families \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Are you aware of any learning, physical or emotional difficulties your child is experiencing?

Yes \_\_\_\_ No\_\_\_\_ (If yes, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Is your child in a special learning program or on a behavior plan at his/her current school?

Yes\_\_\_\_\_ No \_\_\_\_\_ (if yes, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Has your child ever had counseling?

Yes \_\_\_\_No \_\_\_\_\_ (if yes, please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Are there any other details about your child’s school life that are important for the school to know including repeated grades, attendance issues, or recent changes that may affect your child’s performance?

Yes \_\_\_\_\_ No\_\_\_\_\_ (If yes, please explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**For Catholic applicants:**

Which sacraments has the applicant received? Please submit certificates for those sacraments received.

\_\_\_\_\_Baptism \_\_\_\_\_First Penance \_\_\_\_First Communion \_\_\_\_\_Confirmation

**Public School District** in which you reside: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please select:

\_\_\_\_\_\_\_\_ Yes, my child requires bus transportation.

\_\_\_\_\_\_\_\_ No, my child does not require bus transportation.

Preschool Registration Addendum

**The GSC Preschool Program is a full day program for 3 and 4 year olds. The daily schedule is 7:50am to 2:30pm.**

Please select:

Preschool 3 Year Old Program \_\_\_\_\_\_\_\_

Preschool 4 Year Old Program \_\_\_\_\_\_\_\_

Please select:

Three (3) Days: Monday, Wednesday, and Friday \_\_\_\_\_\_\_

Full Week (5) Days: Monday through Friday ­­­­­­­­­­­­­\_\_\_\_\_\_\_

**To complete your application to Good Shepherd Catholic School, please arrange to submit:**

\_\_\_\_\_\_Complete and Sign Application Form

\_\_\_\_\_\_Official School Records

\_\_\_\_\_\_Copy of Student’s Birth Certificate and Social Security Card

\_\_\_\_\_\_Individual Education Plan/504 Plan, if applicable

\_\_\_\_\_\_ $200 Application/Registration Fee

My signature below confirms that I have accurately represented my family and child on this application.

**SIGNATURE OF PARENT/GUARDIAN:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_