



Community of Saints Regional Catholic School

Pre-School Registration Form

2012 - 2013

Catholic Schools
— ARCHDIOCESE OF —
SAINT PAUL & MINNEAPOLIS

Application for New Admission – Please Print

Date: _____ School Last Attended: _____

| | |
|-----------------------|----------|
| _____ Mon - Wed - Fri | Half Day |
| _____ Mon - Wed - Fri | Full Day |
| _____ Mon - Fri | Half Day |
| _____ Mon - Fri | Full Day |
| _____ Tues & Thurs | Half Day |

Applicants:

| <i>Last Name</i> | <i>First Name</i> | <i>Middle Initial</i> | <i>Date of Birth</i> | <i>Gender</i> |
|------------------|-------------------|-----------------------|----------------------|--|
| | | | | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| | | | | <input type="checkbox"/> Male <input type="checkbox"/> Female |

Child Goes By: _____

| <u>Father/Guardian:</u> | <u>Mother/Guardian:</u> |
|-------------------------------------|-------------------------------------|
| First Name: _____ | First Name: _____ |
| Last Name: _____ | Last Name: _____ |
| Address: _____ | Address: _____ |
| City: _____ State: _____ Zip: _____ | City: _____ State: _____ Zip: _____ |
| Home phone: _____ | Home phone: _____ |
| Work: _____ | Work: _____ |
| Cell: _____ | Cell: _____ |
| Email: _____ | Email: _____ |

Parish:
 St. John Vianney
 St. Michael's
 Our Lady of Guadalupe
 St. Matthew's
 Catholic Other Parish _____
 Non-Catholic

School District In Which You Live:

- 6 South St. Paul
- 197 SSP/WSP/Eagan/Mendota Heights
- 199 Inver Grove Heights
- 625 St. Paul
- 833 Woodbury/Cottage Grove
- Other _____

Does the applicant have any special needs or health concerns that we should be aware of?

Ethnic Affiliation (for statistical purposes only):

- Caucasian African American Pacific Islander
 Latino / Hispanic Native American
 Asian Other _____

Main language spoken at home: _____

Please list the applicant's siblings:

| <i>Name</i> | <i>Age</i> | <i>Grade</i> | <i>School Attended/Attending</i> |
|-------------|------------|--------------|----------------------------------|
| | | | |
| | | | |
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Each fall, we publish a school directory. All school families, teachers, and the parish office receive a copy. We also take pictures for the yearbook, brochures, etc. Please indicate below your wishes regarding the publication of your child's picture and school directory information.

- Yes, I want my child(ren) to be included in the school directory and have pictures published.
 No, I do not want to be included in the school directory and have my child's picture published.
 Yes, I want my child(ren) to be included in the school directory but not have their picture published.

Parent/Guardian Signature: _____

Notice of Non-Discrimination Policy:

It is the policy of Community of Saints Regional Catholic School to comply with State and Federal laws prohibiting discrimination and all requirements imposed by or pursuant to regulations issued thereto, to the end that no persons shall be denied or excluded from enrollment or participation in any educational program or activity operated by the school, on the grounds of race, color, national or ethnic origin, gender, status with regard to public assistance or disability.

Signatures:

Father/Guardian: _____ Date: _____

Mother/Guardian: _____ Date: _____

Please be sure to enclose the following:

- Application Form
 Application fee of \$125.00 per family or \$50.00 if completed prior to March 2nd 2012.
Non-refundable; checks made payable to: **Community of Saints Regional Catholic School.**

Please mail to:

Community of Saints Regional Catholic School
337 East Hurley Street
West St. Paul, MN 55118