Dear Parents,

Thank you for considering Sacred Heart School for the education of your child(ren). In order for your child(ren) to be considered in the selection process, we require that you submit the following:

__ Admission Application
__ Copy of Birth Certificate (must be state, not hospital)
__ Copy of Sacramental Certificates (if applicable)
__ Copy of Immunization Record
__ Preschool Assessment (If not attending SH Preschool)
__ Administrative Interview Form
__ Kindergarten Readiness Test (Given by Kindergarten Teacher)
__ Assessment Test (Grades 1-8 only)

**This information must be submitted to the school office by February 13, 2019.**

The kindergarten teacher will be administering a school readiness assessment in April. The purpose of this assessment is to determine each child’s readiness for school. It is not an entrance exam. If the results indicate there are question about your child’s readiness, results will be discussed after testing.

If you have any questions about enrollment please call the school office at (209) 634-7787.

God Bless,

Sacred Heart School
APPLICATION FORM

As partners in the education of their child, parents assume certain responsibilities when their child is accepted into Sacred Heart School. Some of the responsibilities are as follows:

- Attendance at Sunday Masses and Holy Days of Obligation
- Attendance at Parent/Teacher Conferences
- Participation in the Sacramental Preparation Programs
- Payment of tuition, registration, and all other fees
- Reading and abiding by the policies in the Parent/Student Handbook
- Completion of Parent Participation hours and work to support school goals
- Attendance at Parents Club Meetings (minimum of 2 meetings per year)
- Active Support of school fundraisers (time, talent, and/or funds)

My signature below confirms that I have accurately represented my family and child on this application. In addition, it acknowledges that I have read the School’s Mission Statement, Student Learning Outcomes, and statement on the school’s Catholic identity, and will support them should my child attend Sacred Heart School.

______________________________________________________________
Mother’s/Guardian’s Signature Date

______________________________________________________________
Father’s/Guardian’s Signature Date

If this document is signed by one parent or guardian, such parent or guardian represents that he/she, if parent, is either a single parent or is authorized to give this permission on behalf of both parents, or, if guardian, is the appointed guardian of the above-named student.

Name & Address of last school attended (for records request)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

For Kindergarten request:
Did child attend preschool or daycare? o Yes o No

Where________________________________________________________________________
Admission Application

Grade Level Applying For: ______________________________________ Date: __________________________

School Transferring From: ______________________________________

Student’s Name: ______________________________________________

Address: ______________________________________________________

Child’s Birthplace: __________________________ Date of Birth: __________ Ethnicity: ______________________

Father’s Name: ________________________________________________ Birthplace: __________________________

U.S. Citizen: __________________________ Phone: __________________________

Address: ______________________________________________________ Email: __________________________

Sacred Heart Alum: __________ Year Graduated: __________ Occupation: __________________________

If Catholic, Does Father Attend Mass Regularly: ____________________ Religion: __________________________

Mother’s Name (Maiden): __________________________ Birthplace: __________________________

U.S. Citizen: __________________________ Phone: __________________________

Address: ______________________________________________________ Email: __________________________

Sacred Heart Alum: __________ Year Graduated: __________ Occupation: __________________________

If Catholic, Does Mother Attend Mass Regularly: ____________________ Religion: __________________________

Check Appropriate Section(s) as it Applies to Your Child:

____ Lives with Both Parents  ____ Lives with Father  ____ Lives with Mother  ____ Lives with Guardian

____ Lives with Single Parent  ____ Parents Separated  ____ Parents Divorced  ____ Foster Home

____ Father Deceased  ____ Mother Deceased  ____ Stepfather  ____ Stepmother

Will the Parents see that the child attends Mass regularly: ________________

Parish in which parents were married: __________________________

Sacred Heart Parishioners: __________________________ Envelope Number: __________________________

Members of other Parish: __________________________ Envelope Number: __________________________

Baptism Date: __________ Church: __________________________ City: __________________________

First Communion Date: __________ Church: __________________________ City: __________________________

Confirmation Date: __________ Church: __________________________ City: __________________________

Please add any additional information on the reverse side and return this form to the school office.

**************************************************************** Office Use Only****************************************************************

No application will be processed until this information is submitted to the school office Date Received: __________

____ Baptismal Certificate  ____ Vaccination Record  ____ Pastor’s Recommendation

____ Academic Progress Report (1-8)  ____ Birth Certificate  ____ Preschool Readiness Form