

Diocese of Arlington

Application for Admission – New Students

Name of School: St. James Catholic School School Year: 2020-2021 Applying for Grade: _____

STUDENT DATA:

Legal Name: Last: _____ First: _____ Middle: _____ Nickname: _____

Sex: _____ Social Security Number (Optional): _____ Date of Birth (mm/dd/yyyy): _____

Country of Birth (if outside the United States of America): _____ City & State of Birth: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Telephone: _____ Public School System in which student resides: _____ Public School Child Would Attend: _____

ONE Email for Official School Communication: _____

Check all that apply: Only child at this school? Yes No Youngest child at this school? Yes No

Names and grades of sibling(s) at school: _____

Previous Schools Attended:

Name of School: _____ Dates: _____ Grades: _____ Location: _____ Telephone: _____

Religion: _____ Baptized: Yes No

For Catholic Applicants:

Date Church/Parish City and State

Baptism: _____

Reconciliation: _____

First _____

Eucharist: _____

Confirmation: _____

The following information is optional but helpful for applying for federal grants and the NCEA data bank information:

Ethnicity of Child: American Indian/Native Alaskan Asian Black Hispanic
 Native Hawaiian/Pacific Islander White Multi-Racial All Others

St. James Catholic School welcomes all students regardless of race, religion/creed, or ethnic origin.

FAMILY BACKGROUND:

Father

Mother

Full Name: _____
Maiden Name: _____
Country of Birth (if outside USA): _____
Home Address: _____
Home Phone: _____
Cell Phone: _____
Work Phone: _____
Work Email: _____
Occupation: _____
Employer: _____
Religion: _____
Parish: _____
Parish Number (if St. James): _____
Primary Language spoken in home: _____

Person responsible for tuition & fees payment:

Name: _____
Address: _____

Marital Status: Married Single Separated Divorced**
 Mother deceased Father deceased Father remarried Mother remarried

**Note: In the event of a divorce, decree of custody must be filed in the school office, as well as any specific instructions regarding release of the child to a parent.

Student lives with: Both Parents Mother Father Guardian (if checked, fill out below)

Guardian Name: _____ Home Phone: _____ Cell Phone: _____
Address: _____
Occupation: _____ Employer: _____ Work Phone: _____
Religion: _____ Parish: _____ Parish Number (if St. James): _____

Grandparent Information:

Paternal

Maternal

Name: _____
Complete Address: _____
Phone: _____

Has the student ever been tested or evaluated for any disability [i.e. learning disabilities, Attention Deficit (Hyperactivity) Disorder, emotional disabilities, etc.], English as a Second Language, or medical condition?

Yes No

If yes, please submit the most recent IEP along with this registration form.

Please describe on a separate sheet of paper any disability or medical condition that may affect the applicant's ability to fully participate in the academic and/or other programs provided at our school. If applicable, please provide dates of IEP, Student Assistance Plan, Special Ed Child Study, Special Ed Eligibility Date from base public school, and Special Ed Triennial.

If you are requesting an adjustment or accommodation to allow participation to any program, please describe your request. Please provide sufficient evidence to allow us to assess your situation. We may request additional information from you and from an appropriate health professional.

Information about disabilities is requested for the sole purpose of determining whether the school can provide the applicant with an appropriate education or reasonable accommodation and will not be considered in determining whether the student is otherwise qualified for admission.

I agree to abide by the regulations of St. James School and to pay tuition and other applicable fees in a timely manner.

Printed Name of Parent/Guardian

Date

Signature of Parent/Guardian

Are you an alumnus of Saint James Catholic School? Yes No

If yes, please provide graduation
year: _____

To be considered for admission, the following documents and items must accompany this application:

1. Baptismal certificate (Catholics only)
2. Immunization record
3. Copy of custody decree (if applicable)
4. Original birth certificate must be presented to school personnel for verification
5. Current report card including comments **and** the two previous years' report cards
6. Current standardized test scores **and** the two previous years, if available
7. Non-refundable application & school fee
8. Commonwealth of Virginia School Entrance Health Exam Form aka MCH 213 (**Must be submitted prior to beginning of school year**)