



Name: _____
Grade: _____
Year/Semester: _____

<i>(For Office Use Only)</i>

NEW STUDENT APPLICATION FOR ENROLLMENT

ST. CLARE CATHOLIC SCHOOL

821 Prosperity Farms Rd. North, Palm Beach, Florida 33408

Phone: (561) 622-7171 FAX: (561) 627-4426

www.stclareschool.com

Today's Date: _____

Grade Applying for: _____

School year for which applicant is applying? _____ Semester: Fall _____ Spring _____

Applicant Name: _____ Applicant's DOB? _____

Applicant's Gender: Male _____ Female _____ Is Applicant a US Citizen: Yes No

Ethnicity: White Black Hispanic Multi-Racial Asian Pacific Island/Native Hawaiian American Indian/Native Alaskan **Race:** Hispanic Non-Hispanic

Mother's Name: _____ Religion: _____

Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

Occupation: _____ Work Phone: _____

Father's Name: _____ Religion: _____

Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

Occupation: _____ Work Phone: _____

Applicant's Permanent Address: _____

City/State/Zip: _____ Home Phone: _____

With whom does the applicant reside?

Both Parents

Mother

Father

Legal Guardian

Other: _____

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

Parents MUST provide legal documentation of custody decision.

Primary Contact for the Application? Name: _____

Please indicate best email and phone number for primary contact.

Email: _____ Phone: _____

Primary language spoken at home? _____ Other Languages spoken: _____

School Currently Attending and Current Grade? _____

Please list schools your child has attended and the grades/years attended.

Has the applicant ever repeated a grade? if so, which one(s)? _____

Has the applicant ever received auxiliary services such as outside tutoring, psychological or educational testing, speech/language assistance, or professional counseling?

Yes

No

If you answered "yes", please explain below and **please provide a copy of any necessary test results.**

Has the applicant ever been hospitalized for significant medical treatment?

Yes No

If you answered "yes" above, please describe below:

Has the applicant ever been prescribed or currently taking any medication for attention or emotional concerns?

Never Yes, in the past Yes, currently

If "yes," please list medications and any possible side effects:

Are there any health or learning considerations needed for this applicant? _____

Have there been any recent changes in your family, such as separation, divorce, illness or death?

No Yes _____

Please indicate the religion of the applicant. We accept students of all faiths. If Catholic, please denote Parish in which family is registered: **Applicant Religion:** _____ **Catholic Parish:** _____

Catholic Child's Sacrament Record

Has the student been baptized? Yes No Church: _____
First Eucharist Received? Yes No Church: _____
Reconciliation Received? Yes No Church: _____

Please provide documents for each sacrament received.

Are you, or any member of your family an alumnus of St. Clare Catholic School? Yes No

Name: _____ Year Graduated: _____

How did you learn about St. Clare Catholic School? _____

Who is responsible for all tuition and fees? _____

Which parent(s) should be listed in the School Directory? _____

Which parent(s) should receive all school correspondence? _____

Parent/Guardians with whom student lives _____ Another parent, please list _____

Has your child ever been expelled or suspended from school? No Yes If yes, please explain:

These statements are true and accurate to the best of my knowledge. Your signature will attest to the fact that you have read the mission statement and the school belief statement below, and will support them.

Signature _____

Date _____

Additional information and documentation may be required.
COMPLETION OF THIS APPLICATION DOES NOT GUARANTEE ACCEPTANCE.

After notification of admission, a \$200 non-refundable registration fee will be required to reserve a position in the class.

MISSION: The mission of St. Clare Catholic School is to instill Catholic morals and gospel values in a caring, respectful environment. Our school fosters a love for learning and academic excellence that prepares learners for success in high school. As unique children of God, all grow in mind, body, and spirit to become responsible leaders in our global community.

BELIEF STATEMENTS

We believe...

- Each student's social, emotional, physical, and academic needs are best met in a safe, comfortable, learning environment.
- Parents are the primary educators of their children, and we support them in teaching Catholic values in a culturally diverse world.
- Our role as a Catholic school is to proclaim and teach the Gospel message of Jesus, and build a faith community that celebrates through prayer, worship, and service to others.
- Successful learning is best achieved by building mutual respect among and between students, parents, and staff.
- A variety of instructional approaches is needed to challenge students to meet their full potential.

The Catholic Church recognizes marriage as a Sacrament. In the union of Christian spouses the Sacrament of Matrimony celebrates the relationship of Christ to the Church. St. Clare Catholic School strongly supports the sacrament of matrimony as the foundation of family life and of the domestic Church. In recognition of the importance of the matrimonial sacrament to the Catholic faith, parents agree not to compel the attendance, testimony, or deposition of any school or church employees in any divorce, custody, or other legal proceeding, which may in any way involve the dissolution of marriage or the determination of parental/custody rights.

Thank you for applying to St. Clare Catholic School. To complete your application, please fill out the form, and include the following items:

- Copy of Birth Certificate
- Previous school transcripts
- Principal/Teacher Recommendation Forms
- Copy of Baptismal Certificate (Catholic applicants only)
- Proof of Physical Exam and Immunizations (students must be current on immunizations)
- \$50 Application Fee, payable to St. Clare Catholic School

All Kindergarten, and new students in grades 1-8, will be required to take a screening test by appointment at SCCS.

For Office Use Only	
\$50 App Fee Paid:	Date: _____ Check #: _____ Cash: _____
Signed: _____	
Year/Semester/Grade of Admission: _____	