



SACRED HEART SCHOOL

13718 Saratoga Avenue, Saratoga, CA 95070 ✚ (408)867-9241 ✚ school.sacredheartsaratoga.org

Pre-Kindergarten Application Form 2012-2013

How did you hear about Sacred Heart?

Internet Advertisement Drive by Flier Mass Friend: _____ Other: _____

Instructions: Please complete all sections. Indicate "N/A" if something does not apply. Please fill out one application per child. Each application must be accompanied by a \$50.00 non-refundable fee (make checks payable to Sacred Heart School), Birth Certificate, Baptismal Certificate and Report Card if applicable.

Session & Extended Care Preference: (Please choose one. See attached schedule for details.)

AM Session Only (8am-11:30am, M-F) All Day Session (8am-3pm, M-F) Combo Session (8am-3pm, MWF; 8am-11:30am, Tues., Thurs.)

STUDENT INFORMATION

Child's Name: _____ Male Female
Last First Middle

Home Address: _____
Number and Street City State Zip Code

Home Phone: _____ **Birth Date*:** _____ **Place of Birth:** _____ **SS #:** _____
* Child must be 4 years old by November 1, 2012.

US Citizen? Yes No (If no, please provide a copy of the student's visa) Is this student on an F visa? Yes No

Previous preschool attended: _____
School Name Address City, State, Zip Code Phone Number

Is this child English-Language proficient? Yes No **Primary language spoken at home:** _____

Is this child potty-trained? Yes No At what age was potty-training completed? _____

Has this child been asked to be assessed for developmental or learning concerns: Yes No

Has this child been identified with any of the following special needs:

Vision Speech Hearing Learning Behavioral Developmental Other _____

Provide name and district of the public school your child is entitled to attend: _____
School District

Child's Ethnic Background: (Check all that apply)

Native American African American Hispanic Caucasian Filipino Chinese
 Japanese Korean Vietnamese Indian Middle Eastern Pacific Islander
 Other _____

Child's Religion: _____ **Has this child been baptized?** Yes No
(If Yes, please attach baptismal certificate)

Baptismal Date Church Name City State Zip Code Phone Number

Child lives with: Both Parents Mother Father Other _____
(Relationship)

Parental Status: (If child is not living with both parents)

Father: Separated Divorced Widowed Remarried

Mother: Separated Divorced Widowed Remarried

Please explain why you would like your child to attend Sacred Heart School: _____

Non-Discrimination Policy: Sacred Heart School does not unlawfully discriminate on the basis of race, color, national or ethnic origin, age, sex, or disability in the admission of students, the administration of educational policies, scholarship and loan programs, and athletic and other school-administered programs.

School office use only: Date Application and Fee Received: _____ Check #: _____ Current Student Picture: _____
Birth & Baptismal Certificates Verified (date & initial): _____ Report Card Verified: _____ Recommendation Sent/Received: _____

FAMILY INFORMATION

Father

Mother

First and Last Name:		
Home Address: <i>(If different than that of child)</i>		
Home Phone: <i>(If different than that of child)</i>		
Cell Phone:		
E-mail Address:		
Place of Birth:		
Occupation:		
Employer Name:		
Employer Address:		
Business Phone:		
Religion:		
Attends mass regularly: <i>(Please circle)</i>	Yes No	Yes No
US Citizen: <i>(Please circle)</i>	Yes No	Yes No
Sacred Heart Alumni: <i>(Please circle)</i>	Yes No Year Graduated:	Yes No Year Graduated:

Sibling Information: *(Please list all other children in the family)*

Name	Age	Grade	Present School

PARISH INFORMATION

Is your family registered at Sacred Heart Parish? Yes No If yes, Parish envelop number: _____

If no, are you registered at another parish? (Please list) _____

What parish is located closest to your home? _____

TUITION INFORMATION

I understand and accept my financial obligations to the school and will pay tuition and fees in full and on time according to my contract. I understand that the school uses the SMART Management Program for tuition collection.

Financial assistance is available; please check if you require financial assistance. Restrictions apply.

STATEMENT OF AGREEMENT

I hereby certify that the information presented in this application form and any supporting documentations (birth certificate, baptismal certificate, report card, etc.) is true and complete. I understand that any misrepresentations or omissions shall be sufficient cause for disqualification or dismissal. I have read and understand the admissions policies.

Print Parent/Guardian Name: _____ Date: _____
 Parent/Guardian Signature _____