



www.saint-elizabeth.org  
Phone - 626/797-7727  
Fax - 626/797-6541

## Admissions Information For 2012-2013 School Year

### OPEN HOUSE

- Tuesday, November 15, 2011 – Parent Tour @ 9AM
- Sunday, January 29, 2012 – 11:30am–1pm The school will host an open house during Catholic School's Week. Faculty will be present to answer your questions. We strongly encourage parents and children to attend.
- Tuesday, January 31 – 9-11am Visit the classrooms in action.

### SUBMITTING APPLICATION

- **Sibling Applications** Priority deadline is Thursday, December 15. An application fee of \$75.00 is due at the time you submit the application. ***Checks should be made payable to St. Elizabeth School, this fee is non-refundable.***
- A test date will be given when a completed application is submitted to the office.
- **Applications for Non-siblings** - Submission period is 12-1-11 thru 2-10-12. You may also mail the application in. An application fee of \$75.00 is due at the time you submit the application. ***Checks should be made payable to St. Elizabeth School, this fee is non-refundable.***

### THE FOLLOWING MUST BE INCLUDED WITH APPLICATION (NO EXCEPTIONS)

- State Certificate of Birth (hospital certificates are not legal documents)
  - Certificates for Sacraments received (Baptism, Reconciliation, Eucharist) if applicable.
  - Grade 1 - copy of most current Report Card.
  - Grade 2 - copy of Kindergarten and most current Report Card for this year.
  - Grades 3-8 - copies of the past 2 years Report Card and most current Report Card for this year.
  - For grades 3-8 - copy of most recent Standardized Test Scores.
  - Up-to-date Immunization record.
- For the 2012-13 school year all students entering 7<sup>th</sup> grade** will need proof of a Tdap booster shot before starting school. This requirement can be met by receiving one dose of Tdap vaccine on or after the 10<sup>th</sup> birthday.

**APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE ABOVE DOCUMENTS**

### TESTING

- A complete application must be submitted prior to test date, incomplete application will not be accepted.
- A testing appointment will be scheduled for students entering Kindergarten – 2<sup>nd</sup> grade.
- Testing for students entering grades 3-7 is Saturday, February 18, 2012 at 9AM.
- Submitting an application and/or testing does not guarantee acceptance.

### ADMISSION

- Applications will be evaluated after testing is complete.
  - Letters of acceptance for the 2012-2013 school year will be mailed.
  - Priority is given to siblings, then to registered families of St. Elizabeth Parish.
1. To qualify as a supportive parishioner, the following criteria apply:
    - a. Regular Mass attendance.
    - b. Registered and active participant in parish life.
    - c. Regular use of St. Elizabeth Parish envelope.
  2. Kindergarten applicants must be five years of age on or before September 1, 2012. **No exceptions can be made.**  
First Grade applicants must be six years of age on or before September 1, 2012. **No exceptions can be made.**  
Eighth Grade applications will only be accepted if the student is transferring from a Catholic school.  
**No exceptions can be made.**
  3. Tuition and fees for the current year are below.

Application Fee	\$75 (per student)
Registration Fee	\$100 (per family - upon acceptance)
Commitment Fee	\$350 (per family - upon acceptance)
Service Hours Fee	\$450 (per family) or 30 hours of service
Ways & Means Fee	\$150 (per student) or fundraising throughout the year

**2012-13 tuition to be determined**

Book & Tech Fee \$150 (per student)

	<u>2011-2012 Annual Tuition Rates</u>		<u>Twelve Month Rates</u>	
	<b>Parishioner</b>	<b>Non-Parishioner</b>	<b>Parishioner</b>	<b>Non-Parishioner</b>
Per student	\$4,776	\$6,336	\$398	\$528



## 2012-2013 APPLICATION

APPLICANT FOR GRADE \_\_\_\_\_

\$75 Application Fee \_\_\_\_\_

Test Date \_\_\_\_\_

NAME OF STUDENT \_\_\_\_\_

Last

First

Middle

Date of Birth: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Address/city/zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father

Mother

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father

Mother

<b>Child lives with:</b> <b>(please complete)</b>	<input type="checkbox"/> Both natural parents	<input type="checkbox"/> Mother only	<input type="checkbox"/> Father only
	<input type="checkbox"/> Mother/Stepfather	<input type="checkbox"/> Father/Stepmother	<input type="checkbox"/> Guardian (relationship)

### FAMILY INFORMATION

FATHER: \_\_\_\_\_

Last

First

Middle

Birthplace

Religion

Occupation

\*Marital Status

Church of

Marriage

MOTHER: \_\_\_\_\_

Last

First

**Maiden Name**

Birthplace

Religion

Occupation

\*Marital Status

Church of

Marriage

**\*If divorced or separated, please attach custody information.**

STEP PARENT/GUARDIAN: \_\_\_\_\_

Last

First

Middle

Religion

Occupation

Marital Status

<b>Year</b>	<b>SCHOOL(S) PREVIOUSLY ATTENDED (list most current first)</b>	<b>Grade</b>	<b>Name of School and Full Address, Street, City, Zip</b>
_____	_____	_____	_____
_____	_____	_____	_____

**PARISH AND SACRAMENTAL INFORMATION**

RELIGION of student: \_\_\_\_\_

**MASS ATTENDANCE OF FAMILY**

\_\_\_\_\_ Daily \_\_\_\_\_ Weekly \_\_\_\_\_ Monthly \_\_\_\_\_ Occasionally

**PARISH INVOLVEMENT**

Are you registered in St. Elizabeth Parish? Yes \_\_\_\_\_ No \_\_\_\_\_ Parish Envelope # \_\_\_\_\_

What church does family attend if not St. Elizabeth:

\_\_\_\_\_

List volunteer service/s to the parish:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**STUDENT SACRAMENTAL INFORMATION (proof must be attached)**

Baptism: \_\_\_\_\_

Date	Church	City	State
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Reconciliation: \_\_\_\_\_

Date	Church	City	State
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First Eucharist: \_\_\_\_\_

Date	Church	City	State
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1. WHY ARE YOU CHOOSING ST. ELIZABETH PARISH SCHOOL FOR YOUR CHILDREN?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. WHAT DO YOU HOPE ST. ELIZABETH PARISH SCHOOL WILL PROVIDE FOR YOUR CHILDREN?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. CATHOLIC EDUCATORS RECOGNIZE THAT PARENTS ARE THE PRIMARY EDUCATORS OF THEIR CHILDREN. DESCRIBE WHAT YOU DO TO FOSTER YOUR CHILD/REN'S FAITH LIFE?



**RELEASE AND REPORT FORMS  
(GRADES 1-8)**

**TO THE PARENT/GUARDIAN:**

1. Complete the RELEASE FORM at the bottom of this page.
2. Complete the first line of the REPORT FORM.
3. Give your child's present principal or teacher the RELEASE FORM and the REPORT FORM.
4. The principal or teacher should complete the REPORT FORM and mail or fax directly to St. Elizabeth Parish School as soon as possible.

**TO THE SCHOOL:**

1. The school may keep the RELEASE FORM.
2. Please do not return the REPORT to the applicant or his/her family, but mail or fax directly to St. Elizabeth Parish School.

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I hereby give my permission to \_\_\_\_\_ School to release the information indicated on the SCHOOL REPORT form regarding my child, \_\_\_\_\_ for the purpose of admission to St. Elizabeth School.

The information is to be mailed to:

**St. Elizabeth Parish School  
1840 North Lake Avenue  
Altadena, CA 91001  
Attention: Jeanette Cardamone**

Or you may fax the information to: **626/797-6541.**

Signature of Parent/Guardian: \_\_\_\_\_  
Date: \_\_\_\_\_

**ST. ELIZABETH PARISH SCHOOL**  
1840 North Lake Avenue  
Altadena, CA 91001  
(626) 797-7727

**SCHOOL REPORT**

Student : \_\_\_\_\_

Applicant for Grade \_\_\_\_\_  
(2012-2013 school year)

**MOST RECENT STANDARDIZED TEST RESULTS**

NAME OF TEST: \_\_\_\_\_ GRADE: \_\_\_\_\_ DATE: \_\_\_\_\_

Percentile Results:

**ACADEMIC GRADES**

(1-Above average, 2-Average, 3-Below Average)

**ACADEMIC ORIENTATION**

(1-Outstanding, 2-Good, 3-Needs Improvement, 4-Poor)

Art \_\_\_\_\_

Attitude: \_\_\_\_\_

Math \_\_\_\_\_

Study Habits: \_\_\_\_\_

Music \_\_\_\_\_

Completion of Work: \_\_\_\_\_

Physical Ed. \_\_\_\_\_

Group Work: \_\_\_\_\_

Reading \_\_\_\_\_

Relationships with peers: \_\_\_\_\_

Science \_\_\_\_\_

Use of time: \_\_\_\_\_

Social Studies \_\_\_\_\_

Attention span: \_\_\_\_\_

Absences this year \_\_\_\_\_

Parental Cooperation: \_\_\_\_\_

Tardies this year \_\_\_\_\_

Parents meet financial obligations \_\_\_\_\_

**CHARACTER EVALUATION** (particular strengths or weaknesses)

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Is this student expected to be retained at the same grade level for the 2012-13 school year? YES  
NO

Is this student part of a Special Education program? YES NO  
(If yes to either question, please explain.)

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Signature: \_\_\_\_\_

Position: \_\_\_\_\_

School: \_\_\_\_\_

Date: \_\_\_\_\_