

# APPLICATION FOR ADMISSION

## ST. MICHAEL SCHOOL | 2022-2023 SCHOOL YEAR

**FORM A  
REQUIRED**



Welcome! And thank you for your interest in St. Michael School! The St. Michael community strives to be a Christ-centered expression of the family of God. As a mission of St. Michael and St. Basil Parishes, St. Michael Catholic School has been educating and empowering students to help them achieve their educational, social and spiritual goals since 1853.

Upon review of this full packet, we asked that you please complete and return the following forms:

- 1. FORM A: St. Michael School Application Form.**
- 2. FORM B: Parent Permission for Release of Student Records Form:** Students in grades (2-8) please fill out this form and present it to your child's current school.
- 3. FORM C: Confidential Student Recommendation Form:** *If the applicant is entering grade 2 or above, please complete the parent section, and submit it to your child's current teacher with a stamped envelope addressed to St. Michael School, ATTN: Student Recommendation, 6906 Chestnut Road, Independence, Ohio 44131.*
- The final page in this packet is regarding Tuition Information & Assistance. This is an information-only piece, and does not need to be returned.

### **PLEASE SUBMIT, along with your completed application, the following items:**

- a copy of the child's birth certificate (please do not send the original)
- a copy of the child's baptism certificate, if baptized (please do not send the original)
- a copy of child's most recent report card (where applicable)

#### ***For students entering grades 3-8***

- a copy of a recent math paper
- a copy of a recent writing sample
- a copy of their most recent standardized test scores

### **ADDITIONAL INFORMATION:**

- If you have any questions in the completion of the admissions application, you are welcome to call the Main Office at 216-524-6405, or email [robin.maier@stmichaelschoolinfo.com](mailto:robin.maier@stmichaelschoolinfo.com).
- If you are completing forms for more than one child in your family, please submit only ONE Confidential Family Information Form.
- Please return the COMPLETED APPLICATION to St. Michael as soon as possible. We will verify receipt of your completed application BY EMAIL (it is important that you specify a preferred email address to ensure receipt) and will contact you regarding registration when your application review has been finalized..

### **ADMISSION POLICY**

Admissions decisions will not occur until after February 8, 2022. Registration for new students can begin after this date.

St. Michael School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

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### STUDENT INFORMATION

Last Name	First Name	Middle Name	Sex	Birthdate (mm/dd/yyyy)	Birthplace (City, State, Country)	Date Entered (school)		
Residence Address (check box next to current address)		City	County	Zip	Home Phone	Student Parish / City		
<input type="checkbox"/>								
<input type="checkbox"/>								
<input type="checkbox"/>								
Ethnicity (optional)	<input type="checkbox"/> Native Amer/Alaskan	<input type="checkbox"/> Multiracial	<input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American	<input type="checkbox"/> Native Hawaiian/Pacific	<input type="checkbox"/> Hispanic	<input type="checkbox"/> White	<input type="checkbox"/> Other
Sacraments		Baptism Certificate		Student Entered From:		<input type="checkbox"/> Parochial	<input type="checkbox"/> Other	<input type="checkbox"/> Home school
Baptism Date		Verified by		School				
Reconciliation Date		Church		School City				
Communion Date Church, City & State		Rite		School State				
Confirmation Date Church, City & State		City/State/Zip		Grade Entering		<input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8		
Student Lives With (check the box(es) to the left of who student resides with)								
	Last Name	First Name	Email	Occupation	Employer	Best Phone # to contact		
<input type="checkbox"/> Natural Mother (NM)								
<input type="checkbox"/> Natural Father (NF)								
<input type="checkbox"/> Custodial Mother (CM)								
<input type="checkbox"/> Custodial Father (CF)								
<input type="checkbox"/> Other/Legal Guardian								
Parents/Custodial Parents	RELIGION		PARENT STATUS		EDUCATION			
	Catholic, Protestant, Jewish, Other		Married, Separated, Divorced, Remarried, Widowed, Single, Deceased		Under 12 years, High School Graduate, College Non-Graduate, College Graduate, Beyond College			
Natural Mother (NM)								
Natural Father (NF)								
Custodial Mother (CM)								
Custodial Father (CF)								
Other/Legal Guardian								
<i>If applicable, please attach a copy of shared/custody agreement</i>								
Legal Guardian				Other Children in the Family (Please list Name & Birthdays)				
Name				1.		4.		
Address				2.		5.		
City/State/Zip				3.		6.		
Language Spoken at Home:		<input type="checkbox"/> English	<input type="checkbox"/> Other (list)					
Public School District of Residence	Name of Public School in Student Attendance Area			Miles to School		Class of (Graduation Year)		

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## ST. MICHAEL SCHOOL | 2022-2023 SCHOOL YEAR

**FORM B  
REQUIRED**



### PARENT PERMISSION FOR RELEASE OF STUDENT RECORDS

In compliance with Public Law 93-380, Section 438, Subsection b (1) and b (2), Protection of Rights and Privacy of Students, schools may not divulge student records or personal information included in student records to a third party without consent of the parent/guardian of a student under the age of 18. Applicants to Kindergarten need not complete this unless the student will be repeating the Kindergarten year. All other grades (2-8) please fill out this form and return it to your current school.

I grant permission for the release of the following data regarding my child:

<input type="checkbox"/> Academic Records	<input type="checkbox"/> Individualized Educational Plans/or Service Plans
<input type="checkbox"/> Educational Evaluations	<input type="checkbox"/> Health Records
<input type="checkbox"/> Psychological Reports	<input type="checkbox"/> Other school related data

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

### SCHOOL/AGENCY REQUESTING INFORMATION:

Release To: St. Michael School  
6906 Chestnut Road  
Independence, Ohio 44131

Release From: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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**CONFIDENTIAL STUDENT RECOMMENDATION:** to be completed for students entering Grades 2-8

### TO BE COMPLETED BY PARENT(S):

Please complete the first section of this form and submit it to your child's current school with an envelope addressed to St. Michael School at the following address:

**St. Michael School**

ATTN: Student Recommendation  
6906 Chestnut Road  
Independence, OH 44131

(Name of referring school) \_\_\_\_\_ has my permission to answer the following questions and mail this form to St. Michael School in the envelope provided.

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

### TO BE COMPLETED BY TEACHER(S):

Teacher: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Name of Student) \_\_\_\_\_ has applied for admission to St. Michael School for the school year 2022-2023. Our program stresses strong academics, offering a basic curriculum. We try to provide for a normal range of learning differences, but are unable to offer remediation for significant learning needs of students. In the best interest of the child seeking admission to St. Michael School, we request that you respond to the following questions.

1. Has the student ever been recommended for or identified as needing:

- a. Psychological Testing       Yes    No
- b. Special Education         Yes    No
- c. Gifted Program             Yes    No
- d. Grade Retention           Yes    No
- e. Tutoring/Remedial         Yes    No

If the answer was "Yes" to any of the above, to what degree were the parents cooperative? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Based on your knowledge and experience with this student, would you recommend him/her for an academically-based curriculum at St. Michael School? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*please continue on next page*

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**FORM C  
REQUIRED**



### STUDENT RECOMMENDATION CHECKLIST (TO BE COMPLETED BY TEACHER)

	OUTSTANDING	AGE APPROPRIATE	NEEDS IMPROVEMENT
<b>WORK HABITS</b>			
Follows directions			
Listens carefully			
Completes assignments			
Works independently			
Works for accuracy and neatness			
Works cooperatively in the group			
Uses creative abilities			
Demonstrates organizational skills			
Is willing to try new activities			
Responds positively to criticism			
Expresses ideas well			
<b>SOCIAL DEVELOPMENT</b>			
Demonstrates self control			
Is courteous and considerate			
Respects rights and property of others			
Asks for help when appropriate			
Assume responsibility			
Follows school rules			
Is comfortable with adults			
Is supportive of peers			
<b>PHYSICAL DEVELOPMENT</b>			
Small muscle control & coordination			
Large muscle control & coordination			
Speech development			

Thank you for your cooperation and for the time spent in completing this form.

Signature of person completing this form \_\_\_\_\_ Date \_\_\_\_\_

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### TUITION INFORMATION FOR THE 2022-2023 SCHOOL YEAR

We recognize the financial commitment by our families to send their children to Catholic Schools is significant, and we are committed, under the guidance of our Principal, Pastors, and St. Michael and St. Basil Finance Committees, to ensuring that we have maximized the effectiveness of your tuition dollars and eliminated unnecessary expenses. That said, it actually costs St. Michael Catholic School approximately \$7,500 to educate per pupil, at current enrollment levels. The generosity of St. Michael and St. Basil Parish covers the difference between actual per pupil cost and tuition paid per student. We remain thankful for their continued support of the ministry of Catholic education.

Tuition for the 2022-2023 school year for students in Kindergarten through Grade 8\*:

- 1 child           **\$4,300**
- 2 children       **\$8,350**
- 3 children       **\$12,400**
- 4 children       **\$16,450**

***\*A Camp Fee will be added to tuition for students entering 6th grade. This fee will be announced as soon as arrangements are made with the campsite.***

Every student at St. Michael Catholic School Main Campus K-8 may apply for tuition assistance and financial aid. Working in partnership with parents, who are the primary educators of their children, we want to ensure that the young people in our school community have an opportunity to receive an affordable Catholic education. Please contact Christine Dockrill, or the pastor at either parish, with requests for financial aid. Families will be notified of scholarship and financial aid awards as soon as possible, and adjusted tuition rates will be communicated at that time as well.