St. Viator Elementary School

We believe in excellence in education.

NEW STUDENT APPLICATION FOR ADMISSION

ADMISSIONS PROCESS

Please submit the following items for admission review.

- A completed Application for Admission form for each child applying to St. Viator Elementary School

- A copy of the child's Birth Certificate, not a hospital certificate

- A copy of Baptismal Certificate for any religion, if not baptized please note this on the form

- For transfer applicants, grades K - 8th, a copy of current report card from previous school must be included

- Non-refundable application fee of $100 per student

PRIORITY ENROLLMENT ADMISSIONS CRITERIA

All students who complete the application process are considered for acceptance. However, we cannot guarantee enrollment to all who apply. If enrollment requests exceed availability the following criteria will apply:

- Returning students will receive priority, PreK - 8th if application is submitted prior to priority deadline.

- Siblings of current & returning students will receive priority, if application is submitted prior to priority deadline.

- Enrollment will be determined by the St. Viator Elementary School administration based on the individual circumstances of enrolling students and families.

- Current academic information (student grades, attendance, tests scores, IEP's or 504 Plans) are all taken into consideration when reviewing applicants that are transferring from a different school.

- We strive to maintain a diverse community of students and families with a strong commitment to our school and our mission.

Non-Discrimination Policy

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

APPLICATION Please complete one for each child

Academic Year _____ (ex: 2016—2017)   School Hours: Full Day 7:50 – 3:00   Half Day 7:50 – 11:00

Please choose one: New Family _____   Current Family/New Student _____

Applying for Grade:

☐ **PK3** 3 Day Full Day   ☐ **PK3** 3 Day Half Day   ☐ **PK3** 5 Day Full Day   ☐ **PK3** 5 Day Half Day   ☐ **PK4** Full Day   ☐ **PK4** Half Day
If you register for half day, your child may be placed in a combined PK3/PK4 classroom.

Grade _____ *If a new family, a copy of most recent report card should be attached to this application*

STUDENT INFORMATION

▲Student Name (Last, first, middle)   ▲Prefers to be called

Male _____   Female _____   ▲Date of Birth (Month/Day/Year)   ▲Place of Birth (City/State/Country)

▲Student's address - Street   City   State   Zip Code

▲Home Phone number (if applicable)

▲Health Conditions (Allergies, etc.)   ▲List All Medications

▲Last School Attended (if applicable)   ▲Grade

▲Reason for Transfer (if applicable)

▲Public School Nearest Your Home

Does/has student received Special Education Services?   ☐ Reading   ☐ Math   ☐ Speech   ☐ Other: _____

Does student have an IEP?   ☐ Yes   ☐ No   **If yes , information should be attached to this application**

Student's Ethnic/Racial Background:
☐ American Indian or Alaskan   ☐ Asian   ☐ Black or African-American   ☐ Hispanic or Latino
☐ Native Hawaiian or Other Pacific Islander   ☐ White   ☐ Two or more races

▲Languages spoken at home

▲Student's Religion   ▲Parish, Church, or Place of Worship   ▲City/State

▲Baptism Date   ▲Parish, Church, or Place of Worship   ▲City/State

▲First Communion Date   ▲Parish, Church, or Place of Worship   ▲City/State

▲Confirmation Date   ▲Parish, Church, or Place of Worship   ▲City/State

St. Viator Elementary School • 4140 W Addison • Chicago, IL 60641 • 773.545.2173 • www.stviatorchicago.org •

FAMILY INFORMATION

FATHER ☐ Mr. ☐ Dr.

▲NAME

▲ADDRESS if different from applicant

▲CELL PHONE

▲WORK PHONE

▲EMAIL

▲EMPLOYER

▲OCCUPATION

▲RELIGION

▲PLACE OF BIRTH

▲DATE OF BIRTH

☐ Alum of St. Viator School. Year of Graduation: _____

MOTHER ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.

▲NAME

▲ADDRESS if different from applicant

▲CELL PHONE

▲WORK PHONE

▲EMAIL

▲EMPLOYER

▲OCCUPATION

▲RELIGION

▲PLACE OF BIRTH

▲DATE OF BIRTH

☐ Alum of St. Viator School. Year of Graduation: _____

Mother's Maiden Name: _____

Parental Status: ☐ Married ☐ Separated ☐ Divorced ☐ Single Parent ☐ Father Deceased ☐ Mother Deceased

☐ If father remarried, Stepmother's Full Name _____

☐ If mother remarried, Stepfather's Full Name _____

▲If parents are divorced, who has legal custody?   ▲Custody Restrictions if any

▲Who will receive grades, reports, weekly information and mailings?

SIBLING INFORMATION

▲Sibling's Full Name	▲Birthdate	▲Current School	▲Grade
▲Sibling's Full Name	▲Birthdate	▲Current School	▲Grade
▲Sibling's Full Name	▲Birthdate	▲Current School	▲Grade
▲Sibling's Full Name	▲Birthdate	▲Current School	▲Grade

TUITION AND FINANCIAL AID

Are you a registered parishioner of St. Viator?   Yes _____   No _____

PERSON(S) RESPONSILBE FOR FEES AND TUITION:

☐ FATHER   ☐ MOTHER   ☐ BOTH   ☐ OTHER - *Please fill in information below*

_____
▲NAME

_____
▲RELATIONSHIP

_____
▲ADDRESS

_____
▲PHONE NUMBER

St. Viator is committed to making financial aid available to new and returning students as needed. Application for admission to St. Viator should not be discouraged because of affordability of tuition, we believe in giving every child the opportunity to receive a high-quality Catholic education. To be considered for financial aid you must apply through FACTS either online at:

https://online.factsmgt.com/SignIn.aspx?ReturnUrl=%2f

or through the mail. Paper forms are available upon request from the school office.

Will you be applying for financial aid?   Yes ☐   **No** ☐

How did you hear about St. Viator?

_____

_____

_____

Why do you want your child to attend St. Viator?

_____

_____

_____

What are your most important considerations in choosing a school?

_____

_____

_____

I (we) hereby state that the information contained herein is true and complete. I (we) have not knowingly omitted any information regarding my (our) child.

_____   _____   _____   _____
▲**Father's Signature**   ▲**Date**   ▲**Mother's Signature**   ▲**Date**

For office use	Acceptance letter sent: _____
Date received _____ Amount paid _____	Acceptance Retd: _____
Check # _____ Cash _____ Receipt Given _____	$50.00 Acceptance Fee
Family ID _____ Student ID _____	Check# _____ Cash _____ Receipt Given _____