

NEW FAMILY ENROLLMENT FORM

St. Matthew School

4-YEAR OLD KINDERGARTEN (4K), 5-YEAR OLD KINDERGARTEN (5K) AND GRADES 1-8

(A form is needed for **each child's** enrollment.)

CIRCLE
4K Full Day
4K Half Day*
Full day 4K slots take priority over half day.

PLEASE PRINT TODAY'S DATE ____/____/____

GRADE TO ENTER IN SEPTEMBER ____

CHILD'S NAME _____ / _____
Last First Middle Male Female

ADDRESS _____
Street

_____ City _____ Zip Code _____ Religion _____

DATE OF BIRTH ____/____/____ TELEPHONE (Indicate if unlisted. Include area code.) _____

SCHOOL LAST ATTENDED _____

SCHOOL ADDRESS _____
Street City/State Zip Code

DOES YOUR CHILD HAVE ANY SPECIAL NEEDS? ____ YES ____ NO IF YES, PLEASE EXPLAIN _____

HAS YOUR CHILD HAD ANY DISCIPLINARY ISSUES AT THEIR PREVIOUS SCHOOL? ____ YES ____ NO
IF YES, PLEASE EXPLAIN _____

DOES YOUR CHILD HAVE AN IEP? ____ YES ____ NO (IF YES, A COPY SHOULD BE GIVEN TO THE SCHOOL OFFICE.)

WERE YOU REFERRED BY A CURRENT ST. MATTHEW SCHOOL FAMILY? (Name) _____

CHILD RESIDES WITH:	____ Both Parents	RACE:	____ Asian
	____ Father Only		____ American Indian/Native Alaskan
	____ Mother Only		____ Black/African American
	____ JOINT Custody		____ Hispanic
	____ Guardian		____ Native Hawaiian/Other Pacific Islander

If you feel there is a reason we should have a copy of the Divorce Decree regarding the arrangements of the child/ren, a copy should be forwarded to the school office where it will be kept CONFIDENTIAL.

____ White
____ Multi-racial

NAMES AND AGES OF BROTHERS AND SISTERS _____

BAPTISMAL RECORD (If Baptized)

FIRST COMMUNION RECORD (If Received Sacrament)

DATE _____

DATE _____

CHURCH _____

CHURCH _____

CITY/STATE _____

CITY/STATE _____

FIRST PENANCE RECORD (If Received Sacrament)

DATE _____

CHURCH _____

CITY/STATE _____

----- **OVER** -----

FATHER'S NAME _____
Last First Middle

OCCUPATION _____ RELIGION _____

E-MAIL ADDRESS _____

EMPLOYER _____

MOTHER'S NAME _____
Last First Middle Maiden

OCCUPATION _____ RELIGION _____

E-MAIL ADDRESS _____

EMPLOYER _____

THE FAMILY IS REGISTERED AT _____ PARISH.

SIGNATURE DATE

Please include with enrollment:

- \$100.00 (PER CHILD) TUITION DEPOSIT REQUIRED WITH THIS APPLICATION.** Cash or check payable to St. Matthew School. The tuition deposit will be refunded if the grade for which you are registering your child is at its maximum.
- Original certified birth certificate **IS REQUIRED AND INCLUDED** with this registration.
- Copy of baptismal certificate (if child is baptized) **IS REQUIRED AND INCLUDED** with this registration.*
- My child was baptized at St. Matthew Church; therefore, a baptismal certificate is not included with this registration.
- Copy of immunization record **IS REQUIRED AND INCLUDED** with this registration.
- Copy of First Reconciliation/Penance certificate (if child received sacrament) **IS REQUIRED AND INCLUDED** with this registration.*
- My child received First Reconciliation/Penance at St. Matthew Church; therefore, a certificate is not included with this registration.
- Copy of First Communion certificate (if child received sacrament) **IS REQUIRED AND INCLUDED** with this registration.*
- My child received First Communion at St. Matthew Church; therefore, a certificate is not included with this registration.

*Call church where sacrament/s took place and have a copy emailed to school@stmattoc.org.

All new students admitted to the school are enrolled on a probationary status for one semester. Administrative and faculty assessments will be made during this period of time to determine if the school can meet a student's needs. At the end of the probationary period, a student may be removed from probation, may have the probationary period extended, or may be dismissed from the school.

* St. Matthew School admits students of any race, color and national or ethnic origin.

* St. Matthew School accepts children of all religious affiliation.

* To enter 4-year-old Kindergarten (4K), the child must be four years of age on or before September 1. To enter 5-year-old Kindergarten (5K), the child must be five years of age on or before September 1. To enter First grade, the child must be six years of age on or before September 1. This is a Wisconsin State Law requirement.

* All students must also meet state immunization requirements.

FOR OFFICE USE ONLY:
Date returned _____ Tuition Deposit \$ _____ Check # _____ Cash \$ _____ Initial _____
Registration approved by _____ Director of Administrative Services _____