



ST. THOMAS MORE CATHOLIC SCHOOL

7071 East Otero Avenue • Centennial, Colorado 80112

Phone: (303) 770-0441 / Fax: (303) 267-1899

Website: www.stmcatholic.org

ADMISSION APPLICATION FORM 2011-12

For Families & Students **NEW** to STM Catholic

(one form per student)

(THIS IS NOT A REGISTRATION FORM)

Office Use ONLY

Rec _____

Sib _____

PLEASE COMPLETE A SEPARATE APPLICATION FORM FOR EACH STUDENT APPLYING

PLEASE PRINT:

TODAY'S DATE _____ APPLYING FOR GRADE _____ FOR SCHOOL YEAR **2011-2012**

STUDENT'S FULL NAME _____,

LAST

FIRST

MIDDLE

BIRTH DATE* _____ GENDER: M F

*By STATE LAW Child must be 5 years old on or before 10/1/11 to enter Kindergarten and 6 years old on or before 10/1/11 to enter Grade 1.
 *(Please attach a copy of your child's State Issued Birth Certificate)

FAMILY Last Name _____ Father's First _____ Mother's First _____

HOME ADDRESS _____

STREET ADDRESS

CITY

STATE

ZIP

TELEPHONE NUMBERS _____

HOME

HIS WORK/CELL

HER WORK/CELL

E-MAIL ADDRESS: _____

Name of Current Parish: _____ Date Registered in Parish: _____

Parish Envelope #: _____

PLEASE LIST ALL CHILDREN IN YOUR FAMILY:

CHILD'S FULL NAME **DATE OF BIRTH** **GRADE FALL 2011** **ALSO APPLYING TO STM CATHOLIC?**

COMPLETE & SUBMIT THIS FORM TO STM CATHOLIC by FEBRUARY 9, 2011

STM Catholic admits students of any race, color, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the schools. This school is authorized under Federal Law to enroll non-immigrant students.

STUDENT INFORMATION:

Religion: Catholic Other _____

Baptized*: Yes No Date _____ Church _____

Religion Baptized In: _____ City/State _____

Reconciliation: Yes No Date _____ Church _____

City/State _____

First Communion*: Yes No Date _____ Church _____

City/State _____

Confirmation: Yes No Date _____ Church _____

City/State _____

**(Please provide a copy of your child's Baptism and First Communion Certificate, if applicable.)*

Please list all schools attended, beginning with current school (use an extra sheet of paper if necessary):

Name of School	Address City / State / Zip	Grades Attended	Reason for Leaving
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

PLEASE ATTACH COPY OF REPORT CARD. Current report card, report cards from previous school years and any achievement test scores must be submitted for students entering Grades 1 through 8 before application will be considered.

MEDICAL INFORMATION:

Does your child take any medication on a regular basis? Yes No

If yes, please give the name of the medication and reason for taking it:

ADDITIONAL INFORMATION:

Has your child ever been recommended for further evaluations; i.e., for academic, learning, behavioral, or attention problems? Yes No

If yes, does he/she have an IEP or a 504? If so, it must be submitted with this application.

Has your child had any private testing or evaluation? Yes No

If yes, attach any results and briefly describe the reasons for evaluation:

The above information will help us determine if STM Catholic can adequately meet your child's needs. Failure to disclose any of the above could result in the student being asked to leave.

STUDENT INFORMATION RELEASE FORM

I hereby request and authorize **St. Thomas More Catholic (STM Catholic)** to obtain verbal and written information for the purpose of Admissions, for the student listed below:

Name of Student: _____

Name of Teacher / Principal: _____

Year(s) / Grade(s) Attended: _____

School Name: _____

Address: _____

City / State / Zip: _____

Telephone: (_____) _____

FAX: (_____) _____

The following information should be included:

- Standardized tests (intelligence, aptitude, achievement)
- Academic performance (classroom grades and evaluation)
- Immunization Record
- Birth Certificate
- Other relevant information on file

All information I hereby authorize to be obtained from this school / institution will be held strictly confidential and cannot be released by the recipient without written permission.

Signature of Parent or Guardian

Relationship

Date

Please Submit Student Records To:

ATTN: Registrar

STM Catholic

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Centennial, CO 80112

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CATHOLIC SCHOOL
TAKE ANOTHER LOOK

