



## ADDITIONAL STUDENT INFORMATION

Has your child ever been placed on as Individual Education Plan (IEP) or had a CORE Evaluation? Yes \_\_\_\_\_ No \_\_\_\_\_

\* If yes, please provide a copy with your application

Has your child ever been diagnosed with any learning disabilities? Yes \_\_\_\_\_ No \_\_\_\_\_

\* If yes, please explain: \_\_\_\_\_

Has your child ever been suspended or expelled from school? Yes \_\_\_\_\_ No \_\_\_\_\_

\* If yes, please explain: \_\_\_\_\_

Do you currently have a **State Child Care Voucher**? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you intend to use the: After School Program Yes \_\_\_\_\_ No \_\_\_\_\_

Do you intend to use the Quincy School Bus Transportation *if eligibility requirements are met*? Yes \_\_\_\_\_ No \_\_\_\_\_

## DOCUMENTS NEEDED

In order for the student's application to be completed, the following documents must be received.

### Registration Information Needed ~ All Students

- \_\_\_\_\_ A Non-Refundable \$150.00 registration fee per student due at time of registration for all new families
- \_\_\_\_\_ Immunization Record – up to date
- \_\_\_\_\_ Physical - within the year
- \_\_\_\_\_ TB Assessment – Document by Physician if Low Risk
- \_\_\_\_\_ Lead Test for Kindergarten 2 only
- \_\_\_\_\_ Birth Certificate
- \_\_\_\_\_ Baptismal Record if student is Catholic
- \_\_\_\_\_ A copy of all Academic Records, including the last two report cards
- \_\_\_\_\_ A copy of all Standardized Test results
- \_\_\_\_\_ Date and Parish – First Penance and First Communion – Grade Three and above

## SIGNATURE

By signing below, I certify the above information is accurate.

Name of Parent/Guardian (please print): \_\_\_\_\_

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

How did you hear about the Academy? \_\_\_\_\_ Newspaper Ad \_\_\_\_\_ Church Bulletin \_\_\_\_\_ Website  
\_\_\_\_\_ Friends/Family \_\_\_\_\_ Another Parent (Name): \_\_\_\_\_  
\_\_\_\_\_ Other (please specify): \_\_\_\_\_

### ***Office Use Only***

Registration Fee (New Families) ~ \_\_\_\_\_ cash \_\_\_\_\_ check # \_\_\_\_\_ Staff

Registration Fee (Current Families) ~ FACTS: \_\_\_\_\_

### ***Documentation***

\_\_\_\_\_ Birth Certificate \_\_\_\_\_ Baptismal Certificate \_\_\_\_\_ Health Information \_\_\_\_\_ Academic Record

\_\_\_\_\_ Report Cards \_\_\_\_\_ First Penance and First Communion Certificate ~ Date and Parish

Date of Completed File: \_\_\_\_\_ Completed By: \_\_\_\_\_