St. John Neumann Academy Application for Admission

If Catholic: Date Church Baptism	City/State
Language(s) Spoken at Home:	City/State
If Catholic: Date Church Baptism	City/State
Date Church Baptism	
Baptism	
First Reconciliation	
First Eucharist	
Name and location of parish where your family is registered: If not Catholic: Religion:	
If not Catholic: Religion:	
Religion:	
List information for all previous schools your student has attended two schools, please attach the information to this application.) School Name:	
Dates Attended:Street, City, State Reason for leaving this school:Street, City, State Reason for leaving this school: Dates Attended:Street, City, State Reason for leaving this school:Street, City, State Reason for leaving this school:Street, City, State Reason for leaving this school:Street, City, State Please list other schools you are considering: Give a brief explanation why you are interested in having your stud Describe the academic goals for your student if he/she attended SJ you plan for your student to attend SJNA Please list your student to attend SJNA Has your student ever had any of the following services?	
School Address:	School Telephone:
Street, City, State Reason for leaving this school: School Name: Dates Attended: School Address: Street, City, State Reason for leaving this school: Why are you considering changing schools (For 1st – 8th Grade App Please list other schools you are considering: Give a brief explanation why you are interested in having your stude Describe the academic goals for your student if he/she attended SJ you plan for your student to attend SJNA. Please list your student's special interests: Has your student ever had any of the following services?	Grade Level(s):
Reason for leaving this school:	
Dates Attended:	
School Address:	School Telephone:
Street, City, State Reason for leaving this school:	Grade Level(s):
Reason for leaving this school:	
Please list other schools you are considering: Give a brief explanation why you are interested in having your stud Describe the academic goals for your student if he/she attended SJ you plan for your student to attend SJNA Please list your student's special interests: Has your student ever had any of the following services?	
Give a brief explanation why you are interested in having your stud	icants)?
Describe the academic goals for your student if he/she attended SJ you plan for your student to attend SJNA	
you plan for your student to attend SJNA Please list your student's special interests: Has your student ever had any of the following services?	ent attend SJNA.
Has your student ever had any of the following services?	
Gifted and Talented 🗖 Yes 🗖 No Er	
	glish as a Second Language 🗖 Yes 🛛 🗖 No
Special Education/Individual Education Plan/504 🗖 Yes 🗖 No	
Speech/Occupational/Physical Therapy	Mental Health Services \Box Yes \Box No
If yes to any of the above, please explain and provide a copy of any appli	Mental Health ServicesImage: YesImage: NoTutoring ServicesImage: YesImage: No
	Tutoring Services \Box Yes \Box No
Has your student been expelled, asked to withdraw, or suspended	Tutoring Services

Please list the names	3 and following inform	mation for siblings	s or children	living in the househol	ld:
Name:		Age/Grade: _	/	School:	
Name:		Age/Grade: _	/	School:	
Name:		Age/Grade: _	/	School:	
Custodial Parent # 1	•		Custodial Pa	arent # 2:	
Relationship to Student:			Relationship to Student:		
Name:			Name:		
Address (if different than student address):			Address (if different than student address):		
Street			Street		
City State		Zip Code	City	State	Zip Code
Cell Phone:			Cell Phone:		
Home Phone:			Home Phone:		
E-mail:			E-mail:		
Occupation:			Occupation:		
Place of Employment:	:		Place of Em	ployment:	
Religion:			Religion:		
Catholic / Parish: _			Catholic ,	/ Parish:	
🗖 Non-Catholic			□ Non-Cath	nolic	
□ None			□ None		
Please check all that	apply:				
□ Married	□ Separated	□ Single	Divord	ced	
□ Mother Remarried	□ Father Remarried	□ Mother Deceas	ed 🗖 Father	Deceased Dother _	
Custodial Parent/Gu	uardian Information:				
Student lives with: \Box	Both Parents 🗖 M	other 🗖 Father	🗖 Grandpa	rent(s) 🗖 Other:	
If applicable, name o	of person or agency h	naving legal custoo	dy:		
Address:					
		Street			
City		State			Zip Code

St. John Neumann Academy does not discriminate on the basis of race, religion, color, national and/or ethnic origin in the administration of its admission/educational policies, and other school administered programs. While St. John Neumann Academy does not discriminate against students with special needs, a full range of services may not be available to them because of limited resources at our school.

Please note that an assessment of the Admission Application, an official and complete student record from previous school(s), and an interview/meeting with both the Director and the Lead Teacher are required. If any information is withheld or falsified at the time of the application process, St. John Neumann Academy reserves the right to dismiss the student. A non-refundable \$50/child application fee, payable to SJNA, must accompany this application.

If enrollment is offered, all new students will be on probation for the first quarter of enrollment.

I hereby submit this confidential application for admission of the above named student to St. John Neumann Academy.

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

 For Office Use:
 Complete Application
 Birth

 Complete Student Records
 App

 School Entrance Health Form
 Stan

 Preschool Schedule Preference:
 Stan

Birth Certificate
 Application Fee
 Standardinad Test Score

□ Standardized Test Scores

□ IEP/504 Reports (if applicable)

Custody Decree (if applicable)

□ Baptismal Certificate (if applicable)