

St. Joseph School
Parent Agreement for Admission of Student

Name of Student _____ Grade _____

As condition of admission to St. Joseph School, I agree to observe and abide by the conditions for admission stated below:

1. I agree to assist St. Joseph School in the total education of my child by supporting and adhering to all academic and discipline policies of St. Joseph School.
2. I agree to support all St. Joseph School fund raising drives (candy sale \$100 per child, Hawaiian Raffle \$100 per child, Parish Fiesta and \$300.00 scrip purchase per month – per family) or I agree to have an amount equal to the family quota billed to my tuition account to cover the difference.
3. I agree to work 40 hours of service at St. Joseph School.
4. I agree to attend Parent Meetings and to stay informed as to the progress of my child's education.

Como condicion de admision a la Escuela San Jose, estoy de acuerdo a cumplir con las condiciones de admision indicadas abajo:

1. Estoy de acuerdo a apoyar a la Escuela San Jose en la educacion total de mi hijo(a) apoyando y adheriendo a todos los reglamentos academicos y disciplinarios de la Escuela San Jose.
2. Estoy de acuerdo a apoyar todas las campanas para recaudar fondos (venta de dulces por ano \$100 por cada nino, la rifa de Hawaii – \$100 por cada nino, la Fiesta de la Parroquia, y la compra de \$300.00 por mes en certificados – por familia) o estoy de acuerdo a que la cuota familiar sea incluida en la colegiatura para cubrir la diferencia.
3. Estoy de acuerdo a trabajar 40 horas de servicio en la Escuela San Jose.
4. Estoy de acuerdo a asisitir a las Juntas para Padres y manterme informado sobre el progreso de la educacion de mi hijo(a).

Signature of Parent of Guardian

Date

Parish _____ Church Envelope # _____

Pupil Information

Last Name	First	Middle	Sex	Birth Date	Birthplace
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Family Information

Father's First Name	Middle	Last	Birthplace	Religion	Occupation	Marital Status	Cell or Work Phone #
Mother's First Name	Maiden	Last	Birthplace	Religion	Occupation	Marital Status	Cell or Work Phone #
<u>OR</u> Guardian's First Name	Middle	Last	Birthplace	Religion	Occupation	Relationship	Cell or Work Phone #

Residence Information

Address	City	Zip Code	Home Phone #
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Last Schools Attended

Grade	Releasing School Name	City	State	Zip Code
Grade	Releasing School Name	City	State	Zip Code
Grade	Releasing School Name	City	State	Zip Code

Sacramental Information

Baptism Date	Church	City	State	Verifying Signature
First Communion	Church	City	State	Verifying Signature
Confirmation	Church	City	State	Verifying Signature

Other children in family attending St. Joseph School:

Name _____ Grade in September _____

For Office Use Only	Report Card Received _____
Registration Fee Paid _____	
Accepted for Grade _____	Date _____