



Sacred Heart School Admissions Packet 2019-2020 New Students

Dear Parents and Guardians,

Thank you for choosing a Catholic Partnership School for your child. We know that your child will receive an excellent education, and we are certain that your investment in choosing a Catholic education for your child will be a stepping stone for a bright future. All Catholic Partnership Schools provide an excellent, student-centered academic program defined by faith-based values, rooted in respect, and compelled by justice. We are committed to sustaining safe and nurturing schools that inspire and prepare each of our students for success in high school.

As Catholic Partnership Schools continues to grow and build partnerships in the community, we know that you, the parents and guardians, are the ultimate partners in your child's education. We look forward to working with you to educate your child and to develop stronger relationships between home and school.

Sincerely,

A handwritten signature in black ink that reads "Sister Karen Dietrich, SSJ".

Sister Karen Dietrich, SSJ, PhD
Executive Director

Admissions Guidelines

Kindergarten – Kindergarten registration is open enrollment, with a non-refundable fee (unless you have an older child in our school, then we will follow the process listed under “New Students 1st -7th Grade”). Child must be five years old on or before September 30th. All applicants must meet with the principal or designee to review the Parent Contract. Kindergarten screening occurs for the purpose of best meeting the needs of the children.

New Students – We will accept **refundable** registrations for NEW families in 1st -7th grades from January through April 15th. **After April 15th, any new registration is non-refundable.** New students’ applications will be processed and considered to determine if the school is able to meet the needs of each applicant. The decision is communicated through a telephone call and/or in writing. Beginning April 16th, the families will be contacted to confirm their registration. At that point the registration will become complete and non-refundable.

New 8th grade students - Local transfers of students from any public, private or diocesan school into grade 8 may be considered with an interview with the principal prior to acceptance.

Students with Special Needs - The Catholic Partnership Schools are committed to providing an excellent, student-centered education. In order to effectively educate children, parents/guardians are asked to disclose if a child has an IEP, ISP, diagnosed learning disorder, and/or a mental health or mental retardation diagnosis. If a child has any of the above, parents will be asked to submit a copy of the most recent IEP/ISP or psychological/psychiatric evaluation. Students with special needs will be considered for enrollment based on the schools’ ability to meet the child’s needs in a satisfactory manner.

If a child has a special need or is determined to have a special need during the course of the school-year, parents will be required to comply with the recommendations of the IEP/ISP or psychological/psychiatric evaluation. If the parent is not willing to follow the recommendations, the child may not be able to enroll in or continue in a Catholic Partnership School.

English Language Learners - Students who have emigrated from another country, or who live in a home where English is not spoken, may require additional language support in order to ensure successful transition into the school environment. Parents are asked to disclose how long a child has been in the country. ELL students will be screened using a language-based assessment. Students who are determined to need ELL support, may be required to repeat a grade in order to give them the time they need to learn the English language. Additionally, students may receive ESL services through the Commission for Compensatory Education, or through individual/small group tutoring.

Transfers between Catholic Partnership Schools - Circumstances may present themselves where parents/guardians may want to transfer their child(ren) from one CPS school to another. The CPS principal at the receiving school will consult with the sending school’s principal to determine if the child is eligible for re-registration. Tuition assistance time frames for current CPS families will apply to all transferring students.

Non-discrimination Policy -The Catholic Partnership Schools admit students of any race, color, sex, national and ethnic origin to all rights, privileges, programs and activities generally accorded or generally made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in the administration of educational policies, admission policies, athletic programs or other school-administered programs.

Please use the check list below as a guide to completing your registration packet. All of the forms listed below must be completed for your registration to be complete. If you have any questions, please contact the main office.

Admissions Packet Check List:

- _____ Registration Forms
- _____ Up-to-date Immunization Records
- _____ Medical & Physical Forms
- _____ Last report card
- _____ Previous School Transcripts Request Form
- _____ Birth Certificate
- _____ Proof of Address
- _____ Non-refundable Registration Fee (\$100 per family)

If Applicable:

- _____ Individual Education Plan (IEP-where applicable)
- _____ Guardianship Documents (if other than parent)
- _____ Baptismal Certificate (Catholic applicants only)

Office Use Only:

Admissions Packet Check List:

- _____ Registration Forms
- _____ Up-to-date Immunization Records
- _____ Medical & Physical Forms
- _____ Last report card
- _____ Previous School Transcripts Request Form
- _____ Birth Certificate
- _____ Proof of Address
- _____ Non-refundable Registration Fee (\$100 per family)

If Applicable:

- _____ Individual Education Plan (IEP-where applicable)
- _____ Guardianship Documents (if other than parent)
- _____ Baptismal Certificate (Catholic applicants only)



Please Circle Grade: **K** **1** **2** **3** **4** **5** **6** **7** **8**

STUDENT INFORMATION			
Last Name	First Name	Middle Name	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male
Mailing Address			Home Phone
City		State	Zip
Date of Birth	Place of Birth	Ethnicity of Child	Religion of Child
Name of School Transferring from		Address of School transferring from	
Student resides with <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only <input type="checkbox"/> Guardian		If student resides with someone other than legal parent, please indicate name and relationship to child (additional information may be required)	
SACRAMENTAL INFORMATION			
Baptism Date			
Church Name			
City & State of Church			
Communion Date			
Church Name			
City & State of Church			
Confirmation Date			
Church Name			
City & State of Church			

Why do you want your child to attend this school? _____

STUDENT HISTORY

1. Does your child have a medical condition that the school should be aware? Yes No
Please describe _____
2. Does your child have any skin or food allergies that the school should be aware? Yes No
Please describe _____
3. Is your child currently on any medication? Yes No
Please list: _____
4. Has your child had an educational/psychological (child study) evaluation? Yes No
Date of testing? _____
5. Does your Child have an IEP or ISP? Yes No *If yes, please include a copy with this application.*
6. Has your child had remedial (comp. ed.) help? Yes No
7. Has your child had outside tutoring? Yes No
If yes to 5 or 6, please indicate the subject(s) and grade(s): _____
8. Has your child been diagnosed with a speech or language disorder?
 Yes No Date of evaluation: _____
Has your child received speech/language therapy? Yes No Dates of therapy: _____

FAMILY COMMUNICATION SURVEY

1. Can parent or close family member *speak* English? Yes No
2. Can parent or close family member *read* English? Yes No
3. What language do parent/s request oral communication from the school? English Spanish
Other: _____
5. What language do parent/s request written communication from the school? English Spanish
Other: _____
6. Is English your child's first language? _____
If no, what is your child's first language? _____
7. If English is not your family's primary language, how would you describe your child's English language skills? (Please circle)
a. Completely fluent **b.** very good **c.** some help needed **d.** a lot of help needed **e.** I don't know

PARENT/GUARDIAN INFORMATION

Name of Parent/Guardian 1 (Custodial?: Yes / No)		Name of Parent/Guardian 2 (Custodial?: Yes / No)	
Home Phone	Cell Phone	Home Phone	Cell Phone
Primary Language	Religion	Primary Language	Religion
Best way to reach you?	Can we text you?	Best way to reach you?	Can we text you?
Email Address		Email Address	
Home Address		Home Address	
City, ST ZIP Code		City, ST ZIP Code	
Parent/Guardian's Employer		Parent/Guardian's Employer	

Parents' Marital Status (check one):

Not Married Married Together Married Separated Divorced Widowed Other

Emergency Contact Information 1:

First Name: _____ Last Name: _____ Relationship to Child(ren): _____

Home Telephone: _____ Cell Phone: _____

Email Address: _____ Best way to reach: _____

Emergency Contact Information 2:

First Name: _____ Last Name: _____ Relationship to Child(ren): _____

Home Telephone: _____ Cell Phone: _____

Email Address: _____ Best way to reach: _____

Emergency Contact Information 3:

First Name: _____ Last Name: _____ Relationship to Child(ren): _____

Home Telephone: _____ Cell Phone: _____

Email Address: _____ Best way to reach: _____

Please list all schools that your child has previously attended:

<u>Grade</u>	<u>School</u>	<u>Location</u>
Pre-K		
K		
1		
2		
3		
4		
5		
6		
7		
8		

HOW DID YOU HEAR ABOUT US?

Were you referred to our school by a currently enrolled parent or family? If yes, please list the name of the person or people who referred you here:

If you weren't referred by a current family, how did you hear about our school?

I am a graduate of the school. I am a parishioner of the church. Word of Mouth Billboard
 Flyer CPS Website Community Event Newspaper Parish Bulletin Bus/Bus Stop It's in my neighborhood Television Radio Facebook/Social Media Internet Search Walked by school/office Not sure

Do you know a family that would be interested in receiving information about our school? If so, please provide the following information:

1. Prospective Parent/Guardian Name: _____
Telephone Number: _____ Email Address: _____
Mailing Address: _____

Statement of Accuracy and Authenticity

I have read and understood this application and I certify that the information submitted is complete and accurate to the best of my knowledge.

I understand that upon discovery of substantial inaccuracy or omission of information requested herein, Catholic Partnership Schools and its schools reserve the right to revoke admission.

Signature of Parent/ Guardian: _____ Date: _____

Signature of Parent/ Guardian: _____ Date: _____

Our Sponsorship Program

Dear parent/guardian,

Sacred Heart School is in a special position. Our pastor, Father Michael Doyle, raises money through our Sponsorship Program, which allows us to keep our tuition costs very low. Without this program, the cost per student would be well over \$5,000 per year.

This year, each child attending our school receives at least \$4,200 from our Sponsorship Program towards the actual tuition cost. Your tuition covers the remaining costs of educating your child in our school.

We are happy to be able to offer you this financial assistance through our Sponsorship Program.

School Tuition and Fees Agreement

Tuition and fees are a necessary source of funding for Sacred Heart School and the Catholic Partnership Schools. It is expected that payments are made on time each month in order to maintain your child's enrollment at school in good standing. Payments are due on the 1st Friday of each month.

Please note: Families with students in Kindergarten and Eighth Grade must have tuition paid in full prior to the Kindergarten Closing Ceremony and Eighth Grade Graduation Ceremony. In all grades, tuition must be paid in full before we can release academic records and transfers.

Please complete the information below (please print):

Person responsible for tuition and fees: _____
Address (if different) _____ Home Telephone _____
City _____ State _____ Zip _____
Day Time Telephone Number _____ Evening Telephone Number _____
Cell Phone _____ Work Phone _____ Email _____

I understand that my child/children are receiving financial assistance through Sacred Heart's Sponsorship Program. I understand that the tuition and fees (in the box to the right) are my responsibility and are due the 1st Friday of each month.

INITIALS: _____

Statement of Accuracy and Authenticity

I have read and understood this application and I certify that the information submitted is complete and accurate to the best of my knowledge.

I understand and agree to the terms of the tuition plan. I also understand that excessive delinquent tuition and fees may result in the removal of my child/children from Sacred Heart School and other Catholic Partnership Schools. Furthermore, I agree that if I default on the payments for tuition and fees, I will be responsible for the balance due to Sacred Heart School plus any collection fee costs incurred by Sacred Heart School.

I agree to communicate to Sacred Heart School and the Catholic Partnership Schools any changes contained herein as soon as they occur.

I understand that upon discovery of substantial inaccuracy or omission of information requested herein, Sacred Heart School reserves the right to revoke admission to the School.

Signature of Parent/ Guardian: _____ Date: _____

Tuition

1 st Child	\$1,100
2 nd Child	\$1,800
3 rd Child	\$2,100
4 th Child	No Charge

Tuition is due each month as follows:

1 Child	\$110
2 Children	\$180
3 Children	\$210

Additional fees (if applicable):

Graduation fee (8th graders):
\$20/month

Bus – please ask office
After School Care –

1 child	- \$45/week
2 children	- \$65/week
3 children	- \$75/week
4 children	- \$85/week



Sacred Heart School

**Request for Information and
Release of Records Authorization**

Grades K thru 8

Name of Student: _____

Date of Birth: _____ Last Grade Attended: _____

School Transferring From: _____

Address of School: _____

I hereby request the above named school to release my child's records and evaluate data to Sacred Heart School.

Signature of Parent/Guardian

Date

Dear School Administrator,

The student named above is applying for admission to a Catholic Partnership School.

We would appreciate your assistance in obtaining a complete academic transcript by providing us with the following information:

1. The student's grades for the most recent completed term at your school.
2. Complete grade records from your school and any other schools from which you have received records, including health and discipline records.
3. Scores for all standardized testing.
4. A copy of any psychological, 504 Plan, or IEP on file for this child, including placement minutes.

Please mail transcripts to: Sacred Heart School
4th & Jasper Streets
Camden, NJ 08104
Admissions Office

Thank you for your prompt response,

Janet Williams, Principal



Individual Pupil Request for Loan of Text Books

School Year: _____

Date: _____

Public School District:
Address:

Camden City
201 North Front Street
Camden, NJ 08105

Non-Public School:

Sacred Heart School
4th & Jasper Streets
Camden, NJ 08104

Name of Pupil:

Grade:

Name of Parent/Guardian:

Under the provision of the N.J.S.A. > 18A: 58-37.1 et seq., I hereby request the **CAMDEN PUBLIC SCHOOL BOARD** to loan textbooks to **SACRED HEART SCHOOL** in which my child is enrolled. I certify that my child, named above, and I are residents of the State of New Jersey. I understand that the Board of Education of the Public School District in which the non-public school is located with state funding is responsible for providing the loan of textbooks to non-public school pupils pursuant to law and regulations.

Signature of Parent/Guardian:

Date:

One form per child