



The Mission of St. Mary Catholic School is to uphold the Strength of academics, be Motivated to do our best, and to Serve God and His people.

Accredited by the Michigan Association of Non-public Schools

St. Mary Catholic School

34516 Michigan Avenue

Wayne, MI 48184

School Office: 734-721-1240

Fax: 734-467-7381

Email: schooloffice@stmarywayne.org

School Website: www.stmaryschoolwayne.org

APPLICATION PROCESS

Thank you for your interest in St. Mary Catholic School.

In order to begin the application process, a parent or guardian of the prospective student must complete this application form and return it to the School Office. Parents/Guardians are responsible for submitting all health appraisal forms (including immunizations), *vision screening records (Kindergarten only)*, birth and baptismal certificates, and educational evaluations (preschool evaluation, standardized testing, IEPs, and/or previous report cards). Additional updated immunizations records may be needed prior to admittance.

ADMISSION INFORMATION ~ PLEASE PRINT CLEARLY

Preschool 3/4, Pre-K 4/5, Kindergarten, and Grades 1 – 8

Applying for Admission into Grade: _____

Full Name of Student: _____ Gender: _____
First Middle Last

Address: _____
Street City State Zip

Home Phone: (____) _____ Child's Date of Birth: _____

Baptism Information: _____
Parish Name City State Date Baptized

Registered Parish Member of: _____

FAMILY INFORMATION ~ PLEASE PRINT CLEARLY

Father's Full Name: _____

Catholic or Non-Catholic: _____

Cell Phone Number: _____

Email Address: _____

Occupation: _____

Work Phone Number: _____

Language Spoken in home: _____

Alumni: Family Name: _____

Mother's Full Name: _____

Catholic or Non-Catholic: _____

Cell Phone Number: _____

Email Address: _____

Occupation: _____

Work Phone Number: _____

Student lives with: _____

Graduation Year: _____ Returning Family: _____ Yes _____ No

St. Mary Catholic School
STUDENT INFORMATION ~ PLEASE PRINT CLEARLY

_____ is now in _____ Grade at: _____
Name of Student School Name City State

If applying for Preschool or Kindergarten Programs:

Did your child attend a 3 Year Preschool Program? _____ Yes _____ No If yes, where? _____

Did your child attend a 4 Year Preschool Program? _____ Yes _____ No If yes, where? _____

Has your child ever repeated any grade? _____ Yes _____ No _____ N/A If yes, which grade? _____

Has your child had any behavioral, psychological, or educational evaluations? _____ Yes _____ No

If yes, when and by whom? _____

(We may request a copy of the report from you.)

Please indicate any supportive services your child is currently receiving or has received in the past.

_____ Remedial Reading	_____ Learning Disabilities/Resource Room
_____ Remedial Math	_____ Speech/Language Arts
_____ Gifted/Talented Program	_____ Occupational Therapy
_____ Tutoring	_____ Other: _____

What important qualities are you looking for in a school for your student and family?

St. Mary Catholic School respects the student's right to an education in a Catholic school. As required by law, it does not discriminate on the basis of race, nationality, or ethnic origin in the administration of its educational policies, admission policy, athletic, or other school administered programs.

Students with disabilities will be individually evaluated based upon their needs and the school's ability to accommodate those needs. The final decision to admit a student will be made by the Principal.

Children must be five years of age by September 1, 2017 to apply for admission to the Kindergarten program. All students applying to Kindergarten are tested by our Kindergarten teacher to assess readiness.

All students are accepted with probationary status for the first quarter of attendance at St. Mary Catholic School. During this time, the student must display an interest in academics and abide by school rules and policies in our St. Mary School Student Handbook. The Principal and Teacher will evaluate the progress of the student after his/her first quarter.

I understand that this application for enrollment is subject to the conditions stated on this application.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____