# Our Lady of Mount Carmel School
# 2017-2018
# Returning Student Application

## Mission Statement

Our Lady of Mount Carmel School unites with family and community to provide a Christ-centered and educationally stimulating environment, where students recognize their God-given gifts and achieve their highest potential.

## Admission Policy

Admission shall be determined in the following manner:

1. **Current Student:** Students already enrolled in OLMC School from the previous year. All accounts must be up to date prior to entering in August.
2. ***Siblings:** Children who have brothers or sisters already enrolled in OLMC School
3. **Active Catholic Families:** Preference is given to active members of local Catholic parishes.
4. **Non-Active Catholic/Non-Catholic Families:** Children from non-practicing Catholic families or children from families of other faiths

*While siblings are given every consideration, admission is influenced by other factors including, but not limited to, behavior, individual needs, academic record and successful completion of the placement/readiness test.

**Applications must include the following in order to be processed:**

1. A non-refundable, returning student application fee is due by 1/26/17. Please see below for fee schedule:

| **Returning Student Application Fees:** | |
|---|---|
| One Student: | $80 |
| Two Students: | $160 |
| Each Additional Student Add | $55 |
| **New Sibling Application Fee:** | **$90** |

**Applications submitted after 1/26/17 will incur an additional $20 fee per student.**

2. Confirmation of Catholic parish registration is part of the application process for all grades.

Grade for which you are applying _____ Date of Application _____

**For Office Use Only**

Applicant's Name _____ Date Received _____

Application fee: ☐ Cash _____ Check # _____

Notes: _____
_____
_____

**Student Information**

Student's Full Name _____ Sex: M _____ F _____
Street Address _____ City _____ Zip _____
Date of Birth _____ Religion _____ Ethnicity_____

Has your child ever been recommended for or identified as needing:

a. Psychological testing Yes _____ No _____
b. Educational testing Yes _____ No _____
c. Special education Yes _____ No _____
d. Gifted program Yes _____ No _____
e. Grade retention Yes _____ No _____

If the answer is Yes to any of the above, please explain and provide copies of testing reports.
_____
_____

**Father/Guardian Information**

Name _____ OLMC Alumnus? ___Y ___N (yr. graduated ____)

Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Remarried
Occupation/Title _____ Employer _____
Business Phone _____ Home Phone _____
E-mail address _____ Cell Phone _____
Religion _____ Parish _____

**Mother/Guardian Information**

Name _____ OLMC Alumnus? ___Y ___N (yr. graduated____)
Marital Status: ☐ Married ☐ Separated ☐ Divorced ☐ Remarried
Occupation/Title _____ Employer _____
Business Phone _____ Home Phone _____
E-mail address _____ Cell Phone _____
Religion _____ Parish _____

Is applicant living with both parents? ☐ Yes ☐ No
If not, with whom does applicant live? _____ Relationship _____

Correct billing address for student tuition, if other than home address:
_____

May we keep in touch with your child's grandparents regarding newsletters, invitations and other mailings?
If so, please provide contact information (name, address, email):

_____ _____
_____ _____
_____ _____

Signature of parent/guardian _____