

# St. John the Evangelist School

5701 Locust Avenue  
Carmichael, California 95608  
(916) 481-8845, Extension 216  
www.stjohnnev.com

## Grades K - 8 Application Form: (PLEASE PRINT)

Date: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Check No. \_\_\_\_\_

PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION AND RETURN THIS APPLICATION FORM TO THE SCHOOL OFFICE. A **\$25.00 NON-REFUNDABLE FEE PER CHILD** IS ASSESSED TO PARTIALLY COVER THE COST OF TRANSACTIONS WITH FORMER SCHOOLS AND OTHER ADMINISTRATIVE COSTS. **ENCLOSE A CHECK MADE PAYABLE TO ST. JOHN THE EVANGELIST SCHOOL WITH THIS APPLICATION**

1. Full Name of Child Age Date of Birth Grade in 2009-2010

Last First Middle Mo/Day/Yr

Religion \_\_\_\_\_ Baptized: No \_\_\_ Yes \_\_\_ at \_\_\_\_\_  
(name of church)

First Communion: No \_\_\_ Yes \_\_\_ Confirmation: No \_\_\_ Yes \_\_\_

2. Parent/Guardian Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

3. Are you a registered parishioner at St. John the Evangelist Church? Yes \_\_\_ Envelope Number \_\_\_\_\_

No \_\_\_ If "No", in which parish or church are you registered? \_\_\_\_\_

### ACADEMIC INFORMATION:

**ONE COPY OF THE MOST RECENT REPORT CARD AND STANDARDIZED TEST SCORES MUST ACCOMPANY THIS APPLICATION FORM. (Grades 1-8)**

### SCHOOL LIFE:

What school did your child last attend? \_\_\_\_\_

How long did he/she attend that school? \_\_\_\_\_

State reasons for wanting your child to attend St. John's: \_\_\_\_\_

How did you hear about St. John's School? \_\_\_\_\_

PHYSICAL/HEALTH INFORMATION: List any health needs such as asthma, diabetes, epilepsy, impediments to seeing, hearing, speech, motor control, etc.

\_\_\_\_\_

**HOME LIFE:**

Child resides with: \_\_\_\_\_

Relationship: \_\_\_\_\_

List siblings and ages \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are parents separated? Yes \_\_\_\_\_ No \_\_\_\_\_ Divorces? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, who has legal custody? \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

**SOCIAL INFORMATION:**

In order to assist our teachers in working effectively with your child, please indicate if your child has or has had difficulty in interacting with fellow students or teachers. If yes, please explain. This information is important while we assist your child with his/her social and emotional growth. Any social "gifts" may also be explained here.

**FINANCES:**

Do you anticipate any difficulty with tuition payments each month? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

**IMPORTANT (Please Read Carefully):**

1. I understand that his application does not constitute registration or acceptance in St. John the Evangelist School.
2. If a student has a particular need which cannot be met at St. John the Evangelist School, it may be recommended that the child consider a school in which his/her needs can be met.
3. ALL NEW students are accepted on a probationary status. This is designed to ensure proper adjustment to our school environment and curriculum.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

St. John the Evangelist School does not discriminate on the basis of race, color, gender, nationality or ethnic origin in its admission and employment practices.