

St. Peter Catholic School

7129 HWY K (Ashton)
MIDDLETON, WISCONSIN 53562

Phone: (608) 831 -4846 Fax: (608) 831 -6095

E-mail: school@saintpetersaintmartin.org

2017-2018 Application Contract

(NEW STUDENTS ONLY, 3K through grade 5)

(Please return with a non-refundable application fee of \$25.00, made payable to St. Peter Catholic School.)

STUDENT INFORMATION

Name _____
Last First Middle

Please circle: male/female Date of Birth _____ Grade of Enrollment for 2017-2018 _____

Childcare needed after school from 3:10 pm to 5:20 pm: _____ (please check)

City/State/Country of Birth _____

Religion: Catholic _____ Name of Parish _____

Other: Please indicate denomination or other faith tradition _____

Student has received the following Catholic sacraments:

Baptism _____ Date _____ Place of Baptism _____

First Holy Communion (date) _____ First Confession (date) _____

PARENT/GUARDIAN INFORMATION

Father's _____ Mother's Name _____

Address _____ Address _____

City/State/Zip _____ City/State/Zip _____

Home Phone _____ Home Phone _____

Home/Business fax _____ Home/Business fax _____

E-mail _____ E-mail _____

Religion _____ Religion _____

Employer _____ Employer _____

Occupation _____ Occupation _____

Business Address _____ Business Address _____

City/State/Zip _____ City/State/Zip _____

Business Phone _____ Business Phone _____

Cell Phone _____ Cell Phone _____

Which adult should be contacted in case of an emergency? _____

--OVER--

Student lives with: (circle all that apply): Mother and Father Mother only Father only

Guardian Father and Spouse Name of Spouse _____

Mother and Spouse Name of Spouse _____ Shared custody

Send all mailings to residence of: Mother _____ Father _____ Both _____

Is/Are either/both parent(s) a graduate of St. Peter Catholic School? _____ Year of graduation _____

Name(s) of Sibling(s) _____

Date(s) of Birth _____

Name of public school or district of residence _____

"St. Peter Catholic School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and financial aid programs, and athletic and other school-administered programs."

St Peter Catholic School celebrates the ethnic and cultural diversity of our students. To help recognize this diversity, we ask you to share the following information (optional).

Ethnic Background: Native American _____ White _____ Asian _____ Hispanic _____
 African American _____ Pacific Islander _____ Multi-Cultural _____

I (We) understand that: working at fish fries, volunteering throughout year, participating in all fundraisers, purchasing scrip, doing a hall scrub, attending a VIRTUS Awareness session (new families only), and following the policies and procedures of the school are the parent/guardian responsibilities.

Tuition and tuition payment policies are set by the Parish Council in conjunction with the Education Commission, principal, and pastor. Each family is asked to select a tuition payment plan when the tuition statement is issued. Special payment plans may be arranged by contacting the principal.

St. Peter Catholic School provides excellence in education in partnership with the home and parish. *In* some instances the school is unable to provide educational services and the student will be withdrawn or terminated. These instances include, but are not limited to, expulsion, the inability of the school to provide appropriate education for a child because of special needs or unusual needs that require resources that exceed those available at the school, or failure of the parent/guardian to cooperate with the school in its effort to educate the child.

I (We) request to have our child placed on the applicant list at St. Peter Catholic School. If our child is admitted to St. Peter Catholic School, this form serves as the official registration contract.

Parent(s) / Guardian(s) signatures _____

Date _____

Registration is not complete without parent(s)/guardian(s) signature(s).

Return to: St. Peter Catholic School

Please return by February 28, 2017