



MISHAWAKA CATHOLIC

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Application Packet 2015-2016

Thank you for your interest in Mishawaka Catholic School! To apply for admission to Mishawaka Catholic School, we require the following:

1. Application for Admission
2. Photocopy of Birth Certificate
3. Photocopy of Baptismal Certificate (if applicable)
4. Photocopy of child's latest report card if applying for grades 1-4. Photocopies of report cards for the previous three school years (2012-13, 2013-14, 2014-2015) if applying for grades 5-8.
5. A current photo of your child
6. A non-refundable Registration Fee of \$50.00. Your check should be made payable to "Mishawaka Catholic School." The payment of this fee does not guarantee acceptance.

The school office must receive all of the above items (except #4 for students entering Kindergarten for the first time) before your application is considered complete and can be processed.

You will receive notice once your completed application is received. At that time we will schedule your child's placement testing date. All children whose families have submitted completed applications will be interviewed and assessed in reading, writing and math. In the event that there are no openings for a particular grade, the child will be placed on a waiting list.

You will be notified regarding your child's placement. For any questions, please call 574-255-5554.



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Mission

Mishawaka Catholic School is a Christ-centered community of life-long learners. Each child is valued and respected as a unique individual and as a member of God's family. Mishawaka Catholic School is committed to providing a well-rounded education for our students. We promote the Christian growth of each child as he/she develops spiritually, morally, intellectually, socially, culturally, and physically.

Vision

Mishawaka Catholic School provides quality Catholic education in the parish family setting for children pre-school through eighth grade. Our curriculum addresses the needs of the whole child while recognizing the abilities, skills, and talents of each child. Understanding that parents have the primary responsibility for the religious and academic upbringing of children, Mishawaka Catholic School partners with parents to create an atmosphere where each student is: an active person of faith, an effective communicator, a life-long learner, and a socially responsible community member. Grounded in the teachings of Jesus, Mishawaka Catholic School students will develop a healthy self-esteem through mutual respect and compassion for one another. The faculty and staff will prepare students to be enthusiastic and comfortable in their expression of faith.

Admission Policy

It is the goal of Mishawaka Catholic School to educate the whole child. Registration means that the family is willing to comply with the programs and policies of the school and actively participate in the activities that support the school in its programs and philosophy. The goal of the Catholic school is to assist Catholic families in the formation and education of their children in the Catholic faith. It is of utmost importance that parents constantly seek to remind themselves that their support of the school, especially in regards to prompt payment of tuition and a willingness to volunteer in school projects, is a pre-requisite to re-registration and a condition for continued presence in school. The school may deny re-admission to any family delinquent in tuition, or who has not met the contractual requirements. In addition, failure to support the philosophy, objectives, and policies of the school may also result in a bar to re-admission.



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Entrance Requirements

Minimum age; to be admitted into **Kindergarten a child must be five years of age by August 1st** of the year entering Kindergarten. To be admitted into the **first grade a child must be six (6) years old by August 1st** of the applicable school year. Where a child has been legally enrolled in another school, he/she may be admitted to Mishawaka Catholic School and placed in a lower grade as age appropriate at the discretion of the admitting school.

Records at Entrance

Students entering school for the first time are required to bring a birth record, a baptismal record (if applicable), and a record of state required immunizations.

Transfer Student Process and Requirements

All financial obligations to the previous school must be current.

To complete enrollment in Mishawaka Catholic School, the school office must receive an official transcript from the student's prior school.

Special Needs

Admission of transfer students with special needs will be dependent upon the school's ability to meet these needs.

The school must be made aware of any special needs regarding the applicant. Any test results or assessment results must be made available to the school at the time of application.



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Educational History

Please list all schools this student has attended, beginning with the most recent. (Use an extra sheet of paper, if necessary.)

	Years: -	Years: -	Years: -
Name of School			
Address			
Grades attended			
Reason for leaving:			

If your child is currently attending a non-public school, are all financial obligations to that school current? Yes No

Accommodations/Special Needs

The following information will help us to best serve your child's needs.

What language is most often spoken in your child's primary residence? _____

Does this child have any medical concerns/chronic condition/disabilities? Yes No

If "Yes," please describe. _____

Does this child take any medication on a regular basis? Yes No

If "Yes," please give the name of the medication and reason for taking it. _____

Please describe any physical and/or academic accommodations needed: _____



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Parent Questionnaire

Here is what we would like you to know about our family:

Why is a Catholic school education at Mishawaka Catholic School important to your family?

What is the most important aspect of an elementary school curriculum for your child? What do you see as your role in your child's education?

Families are currently required to complete twenty-five hours per year of service to the school. What interests, talents, or resources would you be interested in sharing with this school?

Your child will receive daily religious instruction in the traditions, doctrine and sacramental life of the Catholic Church. As the primary educator of your child/children, how will you support and encourage his/her growth and development of faith within this Catholic school and at home?



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I/we heard about Mishawaka Catholic School from:

I have read and understand Mishawaka Catholic School Acceptance Policy.

Parent/Guardian's Signature: _____ **Date:** _____



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We require that your child’s current school submit the following evaluation form directly to Mishawaka Catholic School. This form is necessary to complete your application.

Request for Current School Information Prior to Acceptance

To the current teacher and/or principal of : _____
(Child’s name – please print)

Please release the requested information for the above-named child and return it to Mishawaka Catholic School at your earliest possible convenience. Our application to Mishawaka Catholic School will not be complete until this form is received.

Parent signature _____ Date _____

Present Grade of Student: _____	Length of time at this school: _____
Has attendance been satisfactory? _____	
Please rate the following areas using this scale: E = Excellent G=Good F=Fair U=Unsatisfactory General Attitude _____ Relationship with teacher _____ Cooperation _____ Relationships with peers _____ Effort _____ School study habits _____ Conduct _____ Home study habits _____	
Is this student currently receiving or has s/he received any special services or educational testing? (i.e., speech and language, resource, tutoring) _____	



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Does this student currently have an IEP or 504 Plan?
Do you have any other concerns about this child?
Additional remarks:

Name of person completing this report (please print):
Signature of person completing this report:
Title: _____ Date: _____
School Name:
School Address:
School Phone: ()

Thank you for taking the time to complete this form. You may return this form to Mishawaka Catholic School by mail, or you may fax it to (574) 255-5554



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For office use only
Date Paid _____
Check number _____
Test date _____ Time _____
Initialed by _____

2015-2016 APPLICATION- New Students K-8

Child's Name _____
Last First Middle

Grade (2015-2016) _____ Present Age _____ Date of Birth _____

Child's Address _____
Number & Street City State Zip Code Telephone Number

Present School _____
Name

Child's Religion _____ Baptism _____
Month/Day/Year Name of Church City/State Zip Code

First Communion _____
Month/Day/Year Name of Church City/State Zip Code

Ethnic background (check one)

- | | | |
|---|--|--|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian | <input type="checkbox"/> Black (not of Hispanic Origin) |
| <input type="checkbox"/> Hispanic Ethnicity of any race | <input type="checkbox"/> Multiracial (two or more races) | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> White (not of Hispanic Origin) | | |

Child lives with. . . (Please circle as many as are applicable and a copy of custody/guardianship papers required if applicable.)

- | | | | | |
|---------------------------------|-------------------------------------|--|----|--|
| <input type="checkbox"/> Father | <input type="checkbox"/> Stepfather | <input type="checkbox"/> Legal Custodian | or | <input type="checkbox"/> Father deceased |
| <input type="checkbox"/> Mother | <input type="checkbox"/> Stepmother | <input type="checkbox"/> Legal Guardian | | <input type="checkbox"/> Mother deceased |

Public School your child would attend _____

Father's Name _____ Father's Religion _____
Last First

Father's E-mail _____ Father's Cell Phone _____

Father's Occupation _____
Business name Number & Street City State Telephone Number

Mother's Name _____ Mother's Religion _____
Last First

Mother's E-mail _____ Mother's Cell Phone _____

Mother's Occupation _____
Business name Number & Street City State Telephone Number

If you are a registered, active member of one of the following Catholic parishes, please indicate the parish in which you are registered.

- St. Bavo St. Joseph St. Monica Other _____

Non-Parishioner

Signature _____ Date _____
Parent or Guardian