

Attach recent
picture of
applicant here,
**Please write full name on back of
picture**

Application Date _____
Registration Fee _____
Activity Fee _____
Check # _____ Date _____
For Internal Use Only

Annunciation Catholic School

32648 N Cave Creek Rd
Cave Creek, AZ 85331
(480) 595-0883 Phone
(480) 595-0886 Fax

2009 - 2010 ENROLLMENT APPLICATION

I hereby make application for my ...daughter () son ()
...First Grade () Second Grade ()

Name of Applicant _____
Last First Middle Nickname
Age _____ Birth Date _____ Place of Birth _____ Social Security Number _____

Parent Information:

Father:

Father (Mr., Dr.) _____
Last/First/M.I.
Address _____
City/State/Zip _____
Telephones ()-____-____ Work ()-____-____.
Cell Phone ()-____-____ Pager ()-____-____.
E-mail Address _____
Employer _____
Employer Address _____
Religion _____
Parish _____
U.S. Citizen Yes/No
Marital Status: Married _____ Separated _____

Mother:

Mother (Mrs., Ms., Dr.) _____
Last/First/M.I.
Address _____
City/State/Zip _____
Telephones ()-____-____ Work ()-____-____.
Cell Phone ()-____-____ Pager ()-____-____.
E-mail Address _____
Employer _____
Employer Address _____
Religion _____
Parish _____
U.S. Citizen Yes/No
Divorced _____ Remarried _____

Applicant's Last Name _____ **First Name** _____

Applicant lives with: _____ Parents _____ Mother _____ Father Other _____

Legal custody: _____ Parents _____ Mother _____ Father Other _____

Any custody issues that we should be made aware of? (yes) (no) Please circle one - (If you circled yes, please submit copies of updated court documents.)

Explain: _____

Adopted: _____ Date _____ Age when Adopted _____

Race/Ethnic Group _____ Caucasian _____ Black _____ Hispanic
_____ Asian _____ Other _____ American Indian

First Language: _____ English _____ Spanish _____ French Other _____

Spoken at home: _____ English _____ Spanish _____ French Other _____

Religion: _____ Catholic _____ Other _____

Baptized: _____ Yes _____ No Date: _____ Church _____

Religion Baptized in _____ City/State _____

Names/Ages/School of all children in family:

Name (First/Last)	Age:	Current School:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list all schools attended by the applicant beginning with current school:

Name of School	Address City/State/Zip	Reason for Leaving
1. _____	_____	_____
_____	_____	_____
2. _____	_____	_____
_____	_____	_____
3. _____	_____	_____
_____	_____	_____

How did you learn about The Annunciation Catholic School?

The Annunciation Catholic School is able to offer tuition assistance via CTODP, the State of Arizona, Economic Security Division, as well as private scholarships from Out Lady of Joy and Saint Gabriel's Parish. If assistance is needed, please contact the office to discuss your needs.

Applicant's Last Name _____

First Name _____

Special Testing and Information:

IF YOU CHECKED ANY OF THE BELOW, PLEASE PROVIDE COPIES OF TEST/REPORTS TO THE ANNUNCIATION CATHOLIC SCHOOL WITH YOUR COMPLETED APPLICATION MATERIALS.

My child has taken the Gesell test. _____Yes _____No

My child has been tested for:

- _____ Giftedness
- _____ Behavioral Difficulties
- _____ Attention Deficit Disorder: Place/Date _____
- _____ Hyperactivity: Place/Date _____
- _____ My child has not received any special testing
- _____ Learning Disabilities
- _____ Speech and Language Delay/Difficulties

My child has been in special programs for:

- _____ Gifted and Talented
- _____ Children with Behavioral Difficulties
- _____ Attention Deficit Disorder/Hyperactivity: Where _____
- _____ My child has not been in any special programs.
- _____ Children with Learning Disabilities
- _____ Speech and Language Remediation

Medical Information:

Does your child take any medication on a regular basis? _____Yes _____No

If yes, please list medication(s), dosage, times given _____

Does your child have any health problems: (For example: allergies to foods, medicine, or bee stings: diabetes, asthma, epilepsy, seizures, physical limitations, etc.)

If yes, please explain: _____

Are there any situations or pertinent information which we should know in order to further understand your child?

Please explain: _____

Doctor Name: _____ Phone (____) _____ - _____ .

Dentist Name: _____ Phone (____) _____ - _____ .

Emergency contact: _____ Phone (____) _____ - _____ .

Emergency Contact #2: _____ Phone (____) _____ - _____ .

To help us keep all information current, please notify the school when any information needs to be updated.

Applicant's Last Name _____

First Name _____

PARENT QUESTIONNAIRE:

What would you say are your child's main qualities, strengths, or talents (academically, socially, physically, and/or morally)?

Has the applicant ever been referred for professional, psychological, or personal counseling? (Explain)

Based on your knowledge of Our Lady of Joy & Saint Gabriel Parishes, why are you seeking to educate your child here?

What do you expect from the Annunciation School faculty/staff?

What can Annunciation Catholic School expect from you/your family in the areas of contributing your time/talents/financial help?

A child's formation can be influenced by television viewing. Do you monitor your child's viewing of television programs? (Explain)

What activities do you enjoy or do regularly as a family: (include church activities)

Please provide any additional information regarding your family or the applicant which would help us to better know and understand his/her educational or personal needs.

I agree that information submitted by third parties in connection with this application can be held AND maintained in confidence by Annunciation Catholic School. Requests for any information provided to Annunciation School's part of this application must be made directly to the third party who supplied that information.

Date: _____

PARENT (or guardian) SIGNATURE(S):

Date: _____

PARENT (or guardian) SIGNATURE(S):

**Annunciation Catholic School
Annual Tuition Schedule
2009-2010**

First & Second Grade Tuition \$3000 per year (Inaugural Year Tuition)

Please note: For existing school children & their families a *non-refundable payment* in the amount of one tuition payment for each student (\$300.00 each, one tenth of tuition) will be due no later than May 18th. This payment will be applied toward your annual tuition. Initial payment for *new* families is due upon notification of placement. The nine remaining tuition payments will be due monthly on the 12th of each month beginning August 12th, 2009.

Non-refundable First Months School Deposit	\$300.00 per child
Activity Fee (Due with Tuition payment August 12, 2009)	\$100.00 per child

Discounts: Currently there are no discounts or promotions available.

Additional Information:

- Class hours are: 8:15am until 3:00pm
- An automatic payment plan and the ability to pay electronic will be available. Details will be provided at a later date.
- Please let us know of your before and after care needs. We are coordinating drop off and pick up with Our Lady of Joy.
- We are currently unable to provide transportation to or from our school.

Payments are Payable to:

Annunciation Catholic School
32648 N Cave Creek Rd
Cave Creek, AZ 85331

Parents Signature: _____