



Saint Vincent de Paul Parish School

•1385 East Spring Lane •Salt Lake City, Utah 84117 •p. 801-277-6702 •f. 801-424-0450 •www.stvincents-school.org

ADMISSION APPLICATION 2018-2019

Applying to (please check one):

- Pre-K (4)
 Kinder
 1st
 2nd
 3rd
 4th
 5th
 6th
 7th
 8th

Student Information

F M

Student Name _____
Last First Middle Preferred Name

Address _____
Street City State Zip

Birthdate _____ Current age _____ Current Grade _____ Last School Attended _____

School's Address _____ School District You Live in: _____
Street City State Zip

Religion _____ Registered parish/church _____ Baptism Date (if Catholic) _____

Race: Caucasian Asian Latin American African American Native American Other: _____

Father

Mother

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Work Phone _____

Email _____

Occupation _____

Employer _____

Religion _____

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Work Phone _____

Email _____

Occupation _____

Employer _____

Religion _____

Family Information

Student is living with Both Mother & Father (listed above)
 Parents are divorced or separated. Student lives with _____

Custody restrictions (court records must be submitted) _____

Language(s) spoken at home: _____

Do you have other children currently attending Saint Vincent? Yes No

Do you have another child currently applying for admission to Saint Vincent? Yes No

If yes, please provide: Name _____ Grade _____
 Name _____ Grade _____

Do you have other children attending another local school: Yes No

If yes, please provide: Name _____ Grade _____ @ _____ School _____
 Name _____ Grade _____ @ _____ School _____

Has an educational or behavioral assessment ever been completed for your child? (An evaluation might include testing for special needs, learning differences or disabilities, and/or physical limitations.) Yes No If yes, please explain:

Does your student have any significant health factors? Yes No If yes, please explain:

Has your child ever skipped a grade? Yes No

Was your child ever suspended, expelled or put on probation? Yes No If yes, please explain:

Why is your child leaving their present school? (Not applicable for Pre-K or Kindergarten students)

What do you hope a Catholic education at Saint Vincent will provide for your child?

How did you learn about Saint Vincent School?

Were you referred by a family from our school? Yes No

If so, please list the family name: _____

Did you or your spouse graduate from Saint Vincent School? _____

The following items MUST be submitted for an application to be considered:

- Registraton fee (\$50 – nonrefundable and not applicable to tuition or registration)
- Completed application form
- Copy of child's birth certificate
- Copy of child's current immunization records
- Copy of child's baptismal certificate (if Catholic)
- Copy of previous year's report cards and test scores
- Copy of any psychological or educational assessments

If you, your spouse, or any adult youth living in your home is listed or has ever been listed on the National Sex Offender Public Registry, you and/or the sex offender are required to contact the principal or pastor prior to the sex offender being on school property and participating in any school events.

The information herein is given for the purpose of obtaining admission to Saint Vincent School. I certify that the information provided herein is correct to the best of my knowledge.

Signature of Parent or Guardian: _____ Date: _____