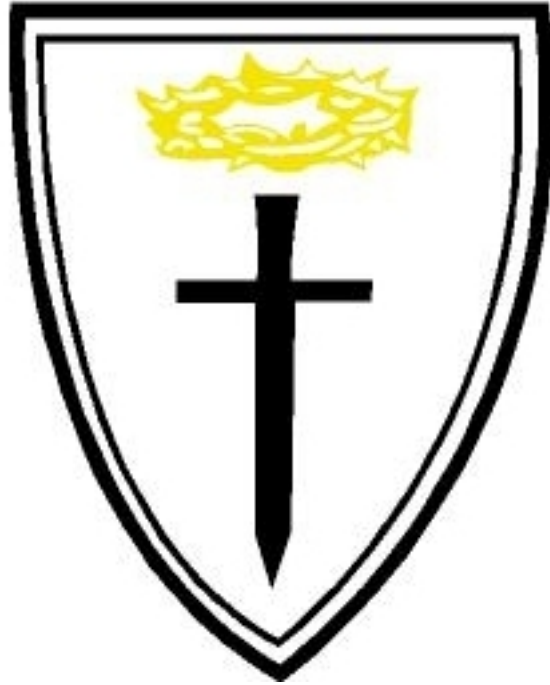


An education built around the principles of Faith, Family and Country



St. Bernard School
A Catholic Elementary

2017-2018 Elementary/Middle School Application Packet



St. Bernard School

A Catholic Elementary

9626 Park Street, Bellflower, CA 90706 (562)867-9410 www.stbernardcatholicschool.com

Checklist for applying to St. Bernard School

Dear prospective SBS student/parent,

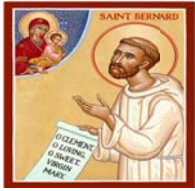
Thank you for your interest in St. Bernard School. We welcome your application to our school and express a sincere interest in getting to know you and your family. Faculty, students, current parents, alumni, and our administrative staff are willing to answer any questions you may have. Please do not hesitate to call.

We encourage everyone to visit us during the application process. By visiting, you have the option to tour the campus and meet our faculty.

St. Bernard School begins accepting applications for the following school year beginning on March 1. Unless your class has a waiting list, if your application is received by April 1 (and accepted), we will guarantee you a place in your class for fall.

Application Checklist

- Completed application for admission
- \$20.00 application fee for new students only (non-refundable)
- Birth Certificate
- Baptism Certificate (If applicable)
- Immunization Record
- Last report card



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Application Date: _____

Grade Entering: _____

APPLICATION FOR ADMISSION for 2017-2018 Year

\$20.00 Application Fee (new students only)

Student Name: _____
Last First Middle Initial Social Security #

Birth Date: _____ Birthplace: _____
Mo/day/year City State Country

Home Address: _____
City State Zip Code

Home Phone: (____) _____ Cell# (____) _____

Including Pre-school, list the schools attended most recent first (include addresses)

School Name	Address	City /State /Zip	School Name	Address	City /State /Zip

Father's Name: _____
Last First Middle Initial Birthplace City/State/Country

Residence Address: _____

Religion _____ Occupation _____ Employer Name: _____

Business Address _____ Work Phone # (____) _____

E-mail Address _____ Driver's License # _____

Mother's Name: _____
Last Name First Maiden Name Birthplace City/State/Country

Residence Address: _____

Religion _____ Occupation _____ Employer Name: _____

Business Address _____ Work Phone # (____) _____

E-mail Address _____ Driver's License # _____

Check home conditions:

- Both Parents Parent & Step Parent Single Parent Home
- Parents Separated Parents Divorced Father Remarried
- Father Deceased Mother Deceased Mother Remarried
- Other _____

If student is under care of Guardian, different from Parents, please list info below.

Last First Middle Initial Birthplace: City/ State / Country Relationship to student

Cell # _____ E-Mail Address _____

In any, list family members currently attending or alumni of St. Bernard School and relation (brother, sister, cousin, etc.)

Are you a registered member of St. Bernard Church? Yes / No If YES, give Parish envelope number: # _____

If not, what parish do you attend? _____

Church Address City

Sacramental Information:

Baptism Date Church City/State

1st Communion Date Church City/State

Sacramental Preparation is requested for my child: _____
Child's Name

Indicate which Sacrament preparation is requested: Baptism 1st Reconciliation 1st Communion

Application completed by: _____ Relation to Applicant _____

Signature _____ Phone # _____

Promptly return completed application, requested documents & \$20.00 fee to the school office.

Available classroom space, a favorable academic readiness evaluation and Principal interview will determine student's acceptance to St. Bernard School.

<u>Do Not Write in this Box.</u>	<u>Office Use Only:</u>
Assessment Date _____	Time: _____
Application Fee Received <input type="checkbox"/> Ck# _____	Cash _____
Certificates Received: Birth <input type="checkbox"/> Baptismal <input type="checkbox"/>	Immunizations <input type="checkbox"/> First Communion <input type="checkbox"/>
	Transcripts <input type="checkbox"/> or Pre-K Verification Letter <input type="checkbox"/>



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2017-2018 Fee Schedule

TUITION AND FEES	1 Child	2 Children	3 Children
REGISTRATION:			
Non-refundable	\$120.00	\$220.00	\$250.00
TECHNOLOGY FEE: per Family	\$50.00	\$50.00	\$50.00
EDUCATIONAL FEE: Due July 1, 2017	\$355.00	\$620.00	\$780.00
Covers testing, student insurance, books and Other educational costs			
TUITION:	\$380.00	\$640.00	\$815.00
August-June (11 months) via FACTS direct withdrawal.	Monthly	Monthly	Monthly
**\$100 per month for each additional student over 3.	\$4,180.00	\$7,040.00	\$8,965.00
	Yearly	Yearly	Yearly
FUNDRAISING:	\$400.00	\$500.00	\$500.00
Net profit from selected fundraising events or monthly payments over 10 months Sept.-Jun.	Yearly	Yearly	Yearly
1st half due November 30, 2017	\$40.00	\$50.00	\$50.00
2nd half due April 30, 2018	Monthly	Monthly	Monthly
DAY CARE:			
Daily day care is available before and after school.		DAILY	
Morning Only: \$7.00 a day per student	\$7.00	\$13.00	\$19.00
Afternoon Only: \$14.00 a day per student	\$14.00	\$28.00	\$40.00
Morning/Afternoon: \$19.00 a day per student	\$19.00	\$37.00	\$56.00
A discounted monthly rate is available to parents; payments must be deducted via FACTS on the 5th of the month. NO EXCEPTIONS		MONTHLY	
Morning Only: Monthly	\$85.00	\$108.00	\$148.00
Afternoon Only: Monthly	\$175.00	\$220.00	\$300.00
Morning & Afternoon: Monthly	\$260.00	\$328.00	\$448.00

All our families are expected to volunteer their time and talent to St. Bernard School. Such service hours allow us to keep the tuition low, while adding to the students' learning environment and providing appropriate role modeling. Opportunities for service are numerous and varied throughout the year, with lists being distributed to all registered families throughout the year. Each family is expected to volunteer a minimum of 40 hours per school year.

"WHAT DO THESE FEES PROVIDE FOR MY STUDENT?"

REGISTRATION FEE

- Archdiocesan Fees
- Student Insurance

EDUCATION FEE

- Accreditation Fee
- Consumable Textbooks
- Math Program
- Counseling Services
- Textbooks

TECHNOLOGY FEE

- Computer operation system updates
- Educational Software
- Security System-Camera Updates
- Testing Software

Registration Financial Obligation

PARENT NAME	STUDENT(S)	GRADES	FACTS NUMBER	
PAYMENT SCHEDULE			YEARLY	MONTHLY
Registration Fee- <i>Due upon Registration</i>				
Technology Fee- <i>Due upon Registration</i>			\$50.00	
First Communion Fee \$150.00 - <i>Due upon Registration</i>				
8 th Graduation Fee \$175.00 - <i>Due upon Registration</i>				
Educational Fee- <i>Due by July 31, 2017</i>				
Parish Festival Tickets - <i>Due by Sept. 23, 2017</i>			\$50.00	
Facts Payment: Bi-monthly (5th & 20th)			YES	NO
Facts Payment: Monthly 5th (or) Monthly 20th			YES	NO
Credit Card (5th) cc# Expires: / /			YES	NO
SCHOOL K-8TH TUITION (AUGUST 2017-JUNE 2018 via FACTS)				
FINANCIAL AID (CEF, OTHER)				
PRE SCHOOL TUITION (AUGUST 2017-JUNE 2018 via FACTS)				
MONTHLY DAY CARE (AUGUST 2017-JUNE 2018 via FACTS)				
FUND RAISING BUYOUT (SEPTEMBER 2018-JUNE 2018 via FACTS)				
<input type="checkbox"/> 20 Service Hours will be completed by November 30, 2017/ 20 Service Hours will be completed by April 30, 2018 (Total 40 hours per year)				
YEAR TOTAL				
TOTAL MONTHLY/BY-MONTHLY PAYMENT				*
<i>I understand that these totals are a projection of my 2017-2018 Financial Obligation. This total may be changed or altered due to Financial Aid awards, late payment penalties, administrative discounts or miscellaneous fees as presented by St. Bernard School. Any balances overdue 30 days or more could result in student suspension.</i>				
*I agree to monthly deductions from my checking account/credit card using above payment method.				
SIGN:			DATE: / /	

SBS Financial Assistance Request

Confidential

Name _____

Address _____ Phone _____

Child's Name _____ Entering Grade _____

Child's Name _____ Entering Grade _____

1. Have you applied for CEF (Catholic Education Foundation) for upcoming school year?

Yes _____ No _____

2. Have you previously received SBS Tuition Assistance? _____

- If yes, Which school year(s)? _____

3. Are you involved in a ministry at St. Bernard Church? Yes _____ No _____

- If yes, please describe:

4. Please briefly describe the reason of requesting financial assistance:

- Will this need be temporary?

5. How much would you be able to pay for your child's education? _____ per month

6. Would you be able to provide St. Bernard School with additional services and/or service hours? Please explain.



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DISMISSAL PERMISSION FORM 2017-2018

Student's Last Name

Student's First Name(s)

Grade

The above named students: (Check any of the below that apply)

- _____ leave only with the legal guardians and/or adults listed below
- _____ walk home (students 5th grade and under are strongly discouraged from walking without someone older with them); *Walking students will be released after 3:15 P.M. and must leave campus immediately. Students may not loiter on neighboring streets. I understand such behavior will permanently rescind walking privileges.*
- _____ are to be sent to daycare (please circle days: M T W Th F - Everyday)

List any adults who may pick-up your child(ren).
Full Name (Please Print)

(May be asked to present I.D.)
Phone

Legal Guardian 1 (please print)

(Home)

Signature

(Work or Cell)

Legal Guardian 2 (please print)

(Home)

Signature

(Work or Cell)

ANY CHANGES TO THIS FORM MUST BE IN WRITING