



St. Mary's School of Piscataway

13407 Piscataway Road
Clinton, Maryland 20735-4564
Office (301)-292-2522
Fax (301)-292-2534
www.stmaryspiscataway.org

2010 – 2011 APPLICATION FORM

Application Fee: \$75 per child (non-refundable)

Student Name: _____ **Gender:** _____ **Entry Grade:** _____
DOB: ____ / ____ / ____ **Place of Birth:** _____
Religion: _____ **Baptism Date:** ____ / ____ / ____ **Location:** _____
Parish Affiliation: _____ **Env. #** _____
Primary language(s) spoken at home with the student: _____
Other language spoken in the home: _____
Student Address: _____

Home Telephone: _____
Student lives with: Both parents Mother Only Father Only Other (specify) _____
Brothers and/or Sisters: Name _____ Age _____
Name _____ Age _____
Name _____ Age _____

Father/Guardian Name: _____ **Religion:** _____
Address: (if different from student) _____

Work Phone: _____ **Cell Phone:** _____
Education: _____ **Occupation:** _____
E-mail: _____
Mother/Guardian Name: _____ **Religion:** _____
Address: (if different from student) _____

Work Phone: _____ **Cell Phone:** _____
Education: _____ **Occupation:** _____
E-mail: _____

Name of Previous Schools	City, State	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has the student been retained in any grade? No Yes

If yes, state grade: _____

Has the student been tested for learning disabilities? No Yes

Has the student had psychological testing? No Yes

If yes, a copy of any testing or evaluation must be submitted to the school with this application.

Does the student have a 504 or IEP Plan in place? No Yes

If yes, a copy of the 504 or IEP Plan must be submitted to the school with this application.

Has student ever been suspended from school? No Yes

If yes, state reason: _____

Has the student ever been expelled or asked to leave school? No Yes

If yes, state reason: _____

Check if you are interested in the Before and/or After Care Program? No Yes

Why would you like your child to attend St. Mary's School of Piscataway? _____

Please submit – *Application Fee, all previous and current report cards, standardized test scores,* Birth Certificate, Baptismal Certificate and Immunization Records.*

* Students applying for Kindergarten must be five years old by September 1, 2010.
 Students applying for First Grade must be six years old by September 1, 2010.

Signature of Parent/Guardian: _____ Date: _____

FOR OFFICE USE ONLY

Application Fee Submitted Cash: _____ Check #: _____

Received by: _____ Date: _____