



## Registration Policies & Procedures for Admission to Ss. Colman-John Neumann Catholic School

*Ss. Colman-John Neumann Catholic School does not discriminate on the basis of race, religion, color, national origin, gender, age, or disability in admission to its programs, services, or activities.*

As we fill classes for admission to Ss. Colman-John Neumann School, preschool through grade eight, priority is given according to the list below:

1. The children of registered St. Colman or St. John Neumann parishioners.
2. Children of registered parishioners of a parish that does not have a school.
3. Children who are not Catholic.

Please make sure *all* forms are complete. Only completed registrations packets will be accepted. New students must provide the following:

- Completed application form
- Copy of Birth Certificate
- Copy of Baptismal Certificate, if Catholic
- Immunization record
- Copy of any psycho-educational evaluations, if applicable
- Textbook Loan Card (signed, new *families* only)
- Photo Release Form
- Memorandum of Understanding
- Non-refundable \$300 application fee per family, which will be deducted from the tuition. Please make check out to: Ss. Colman-John Neumann School.
- Custody Agreement, if applicable

All students entering Kindergarten and all new students to the school must also include:

- Physical form completed by physician required by the first day of school

TRANSFER STUDENTS must include the following additional information:

- Release of Records
- Copy of their most current Report Card or Progress Report
- Standardized test results
- If applicable, psychological or educational test results

Pre-K students must be fully potty trained and should not need to wear “pull ups”.

### AGE REQUIREMENTS:

- To enter Pre-K3 a student must be 3 on or before August 31st.
- To enter Pre-K4 a student must be 4 on or before August 31st.
- To enter Kindergarten, students must be 5 years old on or before August 30th.
- To enter grade 1, students must be 6 years old on or before August 30th.



## Immunization Requirement for Students Entering Ss. Colman-John Neumann School

Dear Parent/Guardian,

Pennsylvania Code 27.77 requires certain immunizations (shots) to enter Pre-Kindergarten and attend school. Please check with your healthcare provider as soon as possible to make sure that your child has all the needed immunizations.

Please send proof of immunizations with registration packet. Updated immunizations can be sent when completed. Mrs. Frank, the school nurse, will contact you if any more records are needed. If not received by August 31, your child will ***NOT*** be permitted to start school in September. Proof of immunization must be an immunization certificate/report from your health care provider.

If you have any questions or concerns, please contact the school nurse, Mrs. Kathy Frank, via email: [kathy.frank@scjnschool.org](mailto:kathy.frank@scjnschool.org) or at 610-525-3266.

Cathleen Lamberto  
Principal

Kathy Frank  
Certified School Nurse



**2018 TUITION  
PRESCHOOL TUITION**

<u>Program</u>	<u>Days</u>	<u>Times</u>	<u>Tuition</u>
3 Half Days	Monday, Wednesday, Friday	8:30 until 12:00	\$2775
3 Full Days	Monday, Wednesday, Friday	8:30 until 2:50	\$3600
5 Half Days	Monday through Friday	8:30 until 12:00	\$3600
5 Full Days	Monday through Friday	8:30 until 2:50	\$4550

**KINDERGARTEN TO GRADE 8**

One child \$3850

Two children \$6545

Three or more children \$9240

Out of Parish \$5675\* Tuition rate is set and collected by the sending parish

\*Your pastor may pay a subsidy towards this tuition. You need to check with your pastor if you are not in St. Colman or St. John Neumann parishes.

All tuition is paid through SMART Tuition, with the exception of St. Thomas of Villanova parishioners. \*STV Parishioners, please see below.

1. There are four options to pay tuition:

- One full payment due in August
- Two payments due August and January
- Quarterly payments due August, November, January and March
- Ten monthly payments beginning in August

2. A non-refundable deposit of \$300 is required along with this form. The \$300 will be deducted from the tuition. Please make check out to: Ss. Colman-John Neumann School.

3. An activity fee of \$125 per child for students in grade K-8 will be added to Smart Tuition.

\*If you are a member of St. Thomas of Villanova Parish:

- All tuition payments will be made to your parish. St. Thomas of Villanova Parish will subsidize your tuition payment and send the per-pupil cost of \$5675.00 (in 2017) to the school.
- The \$125 activity fee, *per child*, which will be deducted from your \$300 deposit. The balance will go towards your tuition.

**Extended Day Program:**

**Before School:** Early drop off is between 6:45 and 7:45. At 7:45, all students in grades K-8 will go to the cafeteria where they will be supervised by the principal. The cost is \$9/hr. for one child and \$13/hr. for more than one child in 2017.

**After School:** After school care takes place from 3:00PM to 6:00PM. The cost is \$9/hr. for one child and \$13/hr. for more than one child in 2017



## 2019-20 Preschool Application for Admission

### APPLICANT INFORMATION

Student Name:

\_\_\_\_\_

\_\_\_\_\_ *Last* \_\_\_\_\_ *Middle* \_\_\_\_\_ *First*  
Address:

\_\_\_\_\_

\_\_\_\_\_ *Street Address* \_\_\_\_\_ *Apt. #*

\_\_\_\_\_

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *Zip Code*

County: \_\_\_\_\_ Public School

District \_\_\_\_\_

Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female Date of Birth:

\_\_\_\_\_ *mm/dd/yyyy*

Place of Birth:

\_\_\_\_\_

\_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ Parish:

\_\_\_\_\_

Baptism: \_\_\_\_\_ Date:

\_\_\_\_\_

\_\_\_\_\_ *Church*

3 year old program \_\_\_\_\_ 4 year old  
program \_\_\_\_\_

Schedule one	Days	Times	Check
3 Half Days	Monday, Wednesday, Friday	8:30 until 12:00	_____
3 Full Days	Monday, Wednesday, Friday	8:30 until 2:50	_____
5 Half Days	Monday through Friday	8:30 until 12:00	_____
5 Full Days	Monday through Friday	8:30 until 2:50	_____

The following information is necessary when completing census data for grants and the National Catholic Education Association (NCEA) Data Bank. **This information is not used in**



any way to determine admission.

Ethnicity of Student: Please check one of the following: \_\_\_ Hispanic \_\_\_ Non-Hispanic

Race of Student: Please check one of the following:

\_\_\_ American Indian/Native Alaskan \_\_\_ Asian \_\_\_ Black
\_\_\_ Native Hawaiian/Pacific Islander \_\_\_ White \_\_\_ Two or more races

FAMILY INFORMATION

Mother

Father

Full Name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Country of birth \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_

Employer [ ] \_\_\_\_\_

Work Phone \_\_\_\_\_



\_\_\_\_\_  
Religion  \_\_\_\_\_  
\_\_\_\_\_

Parents' Marital Status: *Please check all that apply*

\_\_\_\_\_ Single      \_\_\_\_\_ Married      \_\_\_\_\_ Separated\*      \_\_\_\_\_  
Divorced\*

\_\_\_\_\_ Mother Deceased      \_\_\_\_\_ Mother Remarried

\_\_\_\_\_ Father Deceased      \_\_\_\_\_ Father Remarried

\* **NOTE:** Parents who are (or become) divorced, separated, unmarried, or who have any other special circumstances regarding the custody of their children **must** provide the school with a current court order or decree of custody for the student's file. Any other specific instructions regarding release of the child or his/her records must be in writing and signed by the parent or parents with court-ordered legal custody. All parents/guardians with legal authority to make educational and religious decisions on behalf of the applicant must sign this form

Student lives with:

\_\_\_\_\_ Mother and Father    \_\_\_\_\_ Mother Only    \_\_\_\_\_ Father Only  
\_\_\_\_\_ Legal Guardian (please complete the information below):

Full Name:

\_\_\_\_\_  
\_\_\_\_\_

Home Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Phone:

\_\_\_\_\_  
\_\_\_\_\_

Cell Phone:

\_\_\_\_\_  
\_\_\_\_\_

Preferred Email:

\_\_\_\_\_



\_\_\_\_\_

Occupation:

\_\_\_\_\_

\_\_\_\_\_

Employer:

\_\_\_\_\_

\_\_\_\_\_

Work Phone:

\_\_\_\_\_

\_\_\_\_\_

Religion:

\_\_\_\_\_

\_\_\_\_\_

**Student Background Information**

Subject to the review and approval of the principal, students with special needs may be permitted to attend archdiocesan schools; however, parents must provide accurate and complete information regarding the applicant's needs to assist schools in determining whether reasonable accommodations can be made.

Has your child received special services from a professional (e.g. counselor, speech therapist, special education teacher)? \_\_\_\_\_ No \_\_\_\_\_ Yes

*Briefly describe the type of service, length of service, and if it discontinued, a reason for discontinuation:*

\_\_\_\_\_

\_\_\_\_\_

Does your child need accommodations to be successful in school? \_\_\_\_\_ No \_\_\_\_\_ Yes

*if yes, please explain briefly (other forms will be required):*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Physical Disability:

\_\_\_\_\_ No existing physical disability \_\_\_\_\_ Identified Disability (specify):

\_\_\_\_\_



Learning Disorder:

\_\_\_\_\_ No known learning disorder                      \_\_\_\_\_ Identified Disorder (specify):

\_\_\_\_\_

*Please provide copies of any completed diagnostic work, evaluations or specialized plans that have been developed for your child in the past, which may include psycho-educational evaluations, speech & language evaluations, an Individualized Educational Plan (IEP), a 504 plan, testing for Gifted and Talented Programs or any similar documents. Although Archdiocesan Catholic Schools are not required to implement public schools' special education plans, principals may determine the school is able provide reasonable accommodations in some circumstances.*

I/We hereby acknowledge that all the information contained in this application and its accompanying documents is accurate and truthful. I/We agree to pay all of applicant's tuition and fees when due.

**Names of Parents/Guardians: Signatures:**

*Mother Sign and date:*

*Father Sign and date:*

To: Secretary of Education





Commonwealth of Pennsylvania

**CERTIFICATE OF INDIVIDUAL REQUEST  
FOR LOAN OF TEXTBOOKS**

I hereby request the loan of textbooks and instructional materials in accordance with Pennsylvania Act 195-1972 and Act 90-1975 for my child(ren) attending Ss. Colman-John Neumann School. This request will cover the time that my child(ren) attend said school.

\_\_\_\_\_  
Child(ren)

\_\_\_\_\_  
Year of Graduation

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parents or Guardian



## PHOTO RELEASE FORM

I, \_\_\_\_\_ hereby give the Archdiocese of Philadelphia, its successors and assigns and those acting with its authority, the unqualified right and permission to reproduce, copyright, publish, circulate or otherwise use any school pictures of my child produced by the Archdiocese of Philadelphia. This authorization and release covers the use of said school pictures in any published form and any media of advertising.

I also understand that our school may be identified by name and I fully understand that this is a complete release of all claims against the Archdiocese of Philadelphia or any other person, firm or corporation by reason of any such use of such school pictures.

I hereby warrant that I am free to give this permission. I further warrant that the information I have provided is, to the best of my knowledge, true and accurate.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Student

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date

*Cathleen Lamberto*  
*Principal*



**MEMORANDUM OF UNDERSTANDING**

Every Catholic school student has a right to be treated as a child of God, with the love and respect that implies, regardless of family circumstances. In like manner, the believing community has the right to an education guided by Catholic teaching and identity, unimpeded by pressures contrary to Church teaching. As parent/guardian of a student in a Catholic school, I understand, affirm, and support the following:

1. The primary purpose of a Catholic school education is two-fold: to strengthen the Catholic community in its faith, and to form students in the teachings of Jesus Christ and the Catholic Church.
2. Catholic schools are distinctive religious education institutions guided by the teachings of the Catholic Church. They are not simply private schools offering a positive moral code. Rather, they exist to advance the faith mission of the sponsoring Catholic parish(es), Archdiocese, or Catholic religious community.
3. While Catholic education places a high value on academic excellence and extracurricular achievement, its fundamental priority is fidelity to Catholic teaching and identity.
4. Attending a Catholic school is a privilege, not a right. The school and its administration have the responsibility to ensure that Catholic teaching and moral integrity permeate every facet of the school’s life and activity and that the school is able to function as a community of faith.
5. In all questions that involve Catholic teaching, morals, and Church law, the final determination rests with the Archbishop.

As a parent/guardian desiring to enroll my child in a Catholic school, I accept this memorandum of understanding. I pledge support for the Catholic identity and mission of this school and by enrolling my child I commit myself to uphold all principles and policies that govern the Catholic School.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



St. Coleman - John Neumann School