

SAINT BRENDAN SCHOOL TUITION 2011-2012 SCHOOL YEAR

	<i>Catholic</i>	<i>Non-Catholic</i>
One child	\$3,735	\$4,410
Two children	\$5,910	\$7,990
Three children	\$7,175	\$9,320
Pre-K Tuition	\$4,230 *	

(We are currently applying to be a UPK site. If this occurs, all NYC 4 year-olds will attend a full day for a reduced fee.)

- All students must pay a \$150 **non-refundable** registration/re-registration. Seats are limited. Seats **will not** be held without full payment of this fee.
- Students applying for admission for the **first** time must pay a **\$50** application fee. This fee is **non-refundable**.

Additional mandatory financial responsibilities:

- \$250 per family - fundraising obligation (choice of 3 sales)
- \$ 50 per child - cafeteria seat fee (due by October 15th)

** Tuition is due by the **10th** of each month from **August to May**. A late fee of **\$30** will be added to any bill paid after the **15th**.

***THE AUGUST TUITION OR FIRST MONTHS
TUITION IS NON-REFUNDABLE.***

To qualify for the **Catholic** rate –

- Your child must be **baptized Catholic**. (Copy of Baptism Certificate required)

ST. BRENDAN SCHOOL PreK SCHOOL APPLICATION

- PreK 3 - must be 3 years old by December 31st
- PreK 4 - must be 4 years old by December 31st

Pre K 3 and 4-year-old applications must be:

Toilet trained and able to zip up pants

Siblings in St. Brendan: _____ Class _____
_____ Class _____

The following items must be brought at the time of registration:

1. Completed application form
2. Child's original birth certificate
3. Catholic _____ Non-Catholic _____
4. If Catholic, copies of Baptism, Penance, etc....
5. Verification of address: lease, driver's license, Con Ed bill
6. Immunization record (required for entry to all schools)
7. \$50 cash or money order NON-Refundable Application fee
8. \$150 cash or money order NON-Refundable Registration fee
9. 1st month's tuition in cash or money order

The child's seat cannot be held if this obligation is not met.

All of the above information will be verified by the Administration.

Tuition is paid in 10 monthly installments beginning August 10th and ending May 10th. Monthly tuition will include \$3.00 administration fee.



Student Application

Page 1

Date of Application _____

Grade Applying For _____

Birth Certificate # _____

Child's Information

Name _____
Last First Middle

Date of Birth _____ Place of Birth _____

Address _____ City _____ State _____ Apt# _____ Zip _____

Phone _____ Cell # _____ Primary language spoken at home _____

Gender _____ Religion _____ Parish _____

Sacrament	Date	Church	Location
Baptism (certificate required)			
Reconciliation			
First Holy Communion			
Confirmation			

Child resides with _____ Relationship _____

Mother's Information

Please circle **Single** **Married** **Separated** **Divorced** **Deceased**

Name _____
Last First Maiden

Address _____ City _____ State _____ Apt# _____ Zip _____

Birthplace _____ Religion _____ Occupation _____

Business Address _____ Email _____ Phone _____ Cell# _____

Father's Information

Please circle **Single** **Married** **Separated** **Divorced** **Deceased**

Name _____
Last First

Address _____ City _____ State _____ Apt# _____ Zip _____

Birthplace _____ Religion _____ Occupation _____

Business Address _____ Email _____ Phone _____ Cell# _____



Student Application

Page 2

<p>Custody of Child (if applicable)</p> <p>Custodial Parent _____ <small>Relationship</small></p> <p>Documentation _____</p> <p>Date provided _____</p>	<p>Guardianship of Child (if applicable)</p> <p>Guardian _____ <small>Name</small></p> <p>Relationship _____</p> <p>Documentation _____</p> <p>Date provided _____</p>
---	--

Child's Education			
Previous schools attended			
Name	Address	Grades Completed	Dates
<p>Child has been evaluated by the district Committee on Special Education. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Child has been evaluated by a private psychological or educational agency. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If answer to either or both statements above is YES, applicant must complete the following:</p>			
Type of Evaluation	Date of Evaluation	Name of Agency	Contact Name and Phone
Educational			
Psychological			
Speech			
Other _____			
<p>If child has been seen by the public district Committee on Special Education, applicant must complete the following:</p> <p>1. Was an IEP ever generated? <input type="checkbox"/> Yes <input type="checkbox"/> No Copy Submitted _____ <small style="margin-left: 150px;">Date</small></p> <p>2. Child has a Section 504 Accommodation Plan. <input type="checkbox"/> Yes <input type="checkbox"/> No Copy Submitted _____ <small style="margin-left: 150px;">Date</small></p>			
District Name and #	Date of most recent IEP	Date of Last Psychological Evaluation	Classification and Recommended Placement

I affirm that that the above information is true to the best of my knowledge. I understand that failure to provide the required documentation stops the application process. Furthermore, should my child be accepted/admitted under false, incomplete or negligent information, my child will be dismissed from the school. I also agree that should my child be accepted/admitted, my child and I will be bound by the terms and conditions of the school's parent/student handbook including those provisions referencing inoculations. Final acceptance is also dependent on all fees being paid in full to previous school. Acceptance notices will be mailed.

Signature of Parent or Guardian _____	Date: _____
---------------------------------------	-------------

ST. BRENDAN SCHOOL K – 8 SCHOOL APPLICATION

- Kindergarten – must be 5 years old by December 31st
- Grades 1 – 8 Grade _____

Siblings in St. Brendan: _____ Class _____
_____ Class _____

The following items must be brought at the time of registration:

1. Completed application form
2. Child’s original birth certificate
3. Catholic _____ Non-Catholic _____
4. If Catholic, copies of Baptism, Penance, etc....
5. Verification of address: lease, driver’s license, Con Ed bill
6. Latest original report cards and standardized testing scores
7. Copy of IEP papers and all testing results
8. \$50 cash or money order NON-Refundable Application fee

Each application must meet the academic standards of St. Brendan School
All of the above information will be verified by the Administration

Your child must report to St. Brendan School for testing on _____

Tested _____ Comments: _____

Summer School _____ Not accepted _____

Upon successful completion of application process and accepted test results, we will notify you by phone or mail. At that time, you must come to St. Brendan School and submit the following:

9. \$150 cash or money order NON-Refundable Registration fee
10. Immunization record (required for entry to all schools)
11. 1st month’s tuition in cash or money order

Tuition is paid in 10 monthly installments beginning August 10th and ending May 10th. Monthly tuition will include \$3.00 administration fee.



Student Application

Page 1

Date of Application _____

Grade Applying For _____

Birth Certificate # _____

Child's Information

Name _____
Last First Middle

Date of Birth _____ Place of Birth _____

Address _____ City _____ State _____ Apt# _____ Zip _____

Phone _____ Cell # _____ Primary language spoken at home _____

Gender _____ Religion _____ Parish _____

Sacrament	Date	Church	Location
Baptism (certificate required)			
Reconciliation			
First Holy Communion			
Confirmation			

Child resides with _____ Relationship _____

Mother's Information

Please circle **Single** **Married** **Separated** **Divorced** **Deceased**

Name _____
Last First Maiden

Address _____ City _____ State _____ Apt# _____ Zip _____

Birthplace _____ Religion _____ Occupation _____

Business Address _____ Email _____ Phone _____ Cell# _____

Father's Information

Please circle **Single** **Married** **Separated** **Divorced** **Deceased**

Name _____
Last First

Address _____ City _____ State _____ Apt# _____ Zip _____

Birthplace _____ Religion _____ Occupation _____

Business Address _____ Email _____ Phone _____ Cell# _____



Student Application

Page 2

<p>Custody of Child (if applicable)</p> <p>Custodial Parent _____ <small>Relationship</small></p> <p>Documentation _____</p> <p>Date provided _____</p>	<p>Guardianship of Child (if applicable)</p> <p>Guardian _____ <small>Name</small></p> <p>Relationship _____</p> <p>Documentation _____</p> <p>Date provided _____</p>
---	--

Child's Education			
Previous schools attended			
Name	Address	Grades Completed	Dates
<p>Child has been evaluated by the district Committee on Special Education. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Child has been evaluated by a private psychological or educational agency. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If answer to either or both statements above is YES, applicant must complete the following:</p>			
Type of Evaluation	Date of Evaluation	Name of Agency	Contact Name and Phone
Educational			
Psychological			
Speech			
Other _____			
<p>If child has been seen by the public district Committee on Special Education, applicant must complete the following:</p> <p>1. Was an IEP ever generated? <input type="checkbox"/> Yes <input type="checkbox"/> No Copy Submitted _____ <small style="margin-left: 150px;">Date</small></p> <p>2. Child has a Section 504 Accommodation Plan. <input type="checkbox"/> Yes <input type="checkbox"/> No Copy Submitted _____ <small style="margin-left: 150px;">Date</small></p>			
District Name and #	Date of most recent IEP	Date of Last Psychological Evaluation	Classification and Recommended Placement

I affirm that that the above information is true to the best of my knowledge. I understand that failure to provide the required documentation stops the application process. Furthermore, should my child be accepted/admitted under false, incomplete or negligent information, my child will be dismissed from the school. I also agree that should my child be accepted/admitted, my child and I will be bound by the terms and conditions of the school's parent/student handbook including those provisions referencing inoculations. Final acceptance is also dependent on all fees being paid in full to previous school. Acceptance notices will be mailed.

Signature of Parent or Guardian _____	Date: _____
---------------------------------------	-------------