

Saint Joseph Catholic School

Welcome!

Thank you for your interest in enrolling your child in Saint Joseph Catholic School. Saint Joseph Catholic School has provided excellence in Catholic Education to the Manatee County community since 1954. Our Philosophy and Mission Statement are listed below.

PHILOSOPHY

We believe that God created each child in His own image and likeness with unique qualities and abilities for a specific purpose. It is the privilege, duty, and responsibility of Saint Joseph Catholic School to provide the fertile environment wherein the individual can grow and develop to his/her highest potential spiritually, physically, and intellectually.

MISSION

Rooted in Catholic faith and committed to academic excellence, St. Joseph Catholic School develops personal responsibility, character, service, and leadership.

REQUIRED DOCUMENTS 2020-2021

Saint Joseph Catholic School

Please follow the instructions carefully so that we may evaluate your application immediately upon receipt:

1. Fully completed and signed Application Form
2. Application Fee (non-refundable)
3. Provide Copy of:
Check List: a. Birth Certificate
 b. Baptismal Certificate
 c. Florida Health Certificate
 d. Florida Shot Record
 e. Current Report Card (Students entering grade 1-8)
 f. Current Progress Report (Students entering grades K-8) or (Mid-term entrees)
 g. Most Recent Achievement Test Scores (Students entering grades 3-8)
 IEP or Other Academic Evaluation if applicable
 VPK Certificate of Eligibility (PK4 students)
4. Signed Tuition Policy and Commitment Form by parent/guardian and pastor if necessary
5. Completed Emergency Form

Once the application form and paperwork is received, the guidance department will review the information. You will be notified of acceptance as soon as this is completed. Upon approval, an acceptance letter will be mailed to you.

Application will not be processed or allowed to start school until the following is completed:

- Registration Fee paid
- Family is enrolled in FACTS Tuition Management
- Financial Aid paperwork completed if necessary
 - FACTS Grant and Aid
 - Step-up For Students
 - McKay Scholarship
 - Knights of Columbus

If you have any questions, please feel free to contact us at 755-2611. Again, thank you for choosing St. Joseph Catholic School.

TUITION AND FEES 2020-2021

Saint Joseph Catholic School

CHARGE	COST	DUE DATE	OTHER;
Application Fee	\$55.00	Due with application	Non-Refundable
Registration Fee	\$250.00	Due with acceptance	Non Refundable
Returning Families	\$200.00 (on or before 2/28)	Due with application	Non Refundable
<p>*Parents affiliated with a Catholic parish are encouraged to apply for financial assistance if needed. Presently, more than ½ of our Catholic families receive assistance.</p>			
Tuition	\$7,200.00	July 15 July 15 & December 15 July – April or June (10 months or 12 months)	Annual Semi Annual Monthly Debit
Material & Digital Content Fee	\$400.00 (K-8) \$300 (PK) (Fee covers, but not limited to: textbook rental, consumable workbooks, art materials, school wide consumable supplies, science lab fees, technology licensing fees & student accident insurance)	Due August 1 st	Non-Refundable
Extended Day (Per Day Cost)	\$ 2.00 (7:00 am – 7:45 am) \$10.00 (3:00 pm – 6:00 pm)* \$ 5.00 (3:00 pm – 6:00 pm)* * After 6pm - \$1 is charged per minute	Paid Weekly Paid Weekly Paid Weekly	Per child For first child Each additional child
Bus Fee	\$1200.00 (Round Trip) \$1000.00 (One-Way)	Paid Quarterly Paid Quarterly	

Financial Policies

- Families who are affiliated with a Catholic Parish may complete an online application <https://online.factsmgmt.com/aid>
- All families must have a FACTS account <https://factsmgmt.com/>
- A fee of \$25 is charged for all returned checks.
- Tuition and fees are not refundable.
- **All late payments are subject to a 3% late fee.**

DRESS CODE

2020-2021

Saint Joseph Catholic School

Uniforms

All students must be in uniform every day. Uniforms are expected to be clean and in good condition. Non-uniform days will be announced throughout the year. If there is a time when the official school uniform cannot be worn, a note from the parent/guardian must be written to the administration. Students who are out of uniform without this excuse will be issued a dress code violation via Disciplinary Notice, and sent home until compliance with the uniform policy has been achieved. Uniforms are purchased through Children's World:

Children's World
4525 Bee Ridge Road,
Sarasota, FL 34233
(941)-955-6999
www.ChildrensWorlduniform.com

Uniforms may also be purchased at the Eagle's Nest Recycled Uniform Shop located on campus.

Grades PreK3/4

Girls and Boys wear sneakers, white socks, blue PE t-shirts and navy PE shorts or Polo dress with school logo

Grades K-4

Girls wear plaid jumpers, shorts, or skorts and yellow blouse with Peter Pan collar and school logo. Socks should be **solid** black, white, or navy. Shoes should be **solid** blue, black, burgundy, or brown oxford, loafer, or sneaker (including shoelaces), or two-toned saddle oxford. High top sneakers are not allowed.

Boys wear navy, SJCS monogrammed, uniform shorts or pants and light blue polo uniform shirt with school logo. Socks should be **solid** black, white or navy socks. Shoes should be solid blue, black, or brown loafer or sneaker (including shoelaces). High top sneakers are not allowed.

Grades 5-8

Girls and Boys wear khaki, SJCS monogrammed, uniform shorts, pants, or skorts and navy blue polo uniform shirt with school logo. Socks should be crew, ankle, or ped **solid** black, white, or navy. Shoes should be **solid** blue, black, burgundy, or brown oxford, loafer, or sneaker (including shoelaces), or two-toned saddle oxford. High top sneakers are not allowed.

PE Uniforms

Girls and Boys wear sneakers, solid black, blue, or white socks, blue PE t-shirts and navy mesh PE shorts with school logo. Grades K-3 may wear PE uniforms to school on their PE days.

Winter Dress, Accessories, and Hair for all grades

Winter Uniform: Students may wear navy embroidered logo **uniform** sweatshirt, cardigan, or hoodie. Students may wear plain, solid, navy or white long-sleeve t-shirts, under uniform shirts. Only uniform outer wear may be worn **outside** the classroom when temperatures are above 40°. Winter jackets or other cold-weather clothing may be worn **outside** the classroom on days below 40° by 7:00 a.m. or as otherwise determined by administration. Students may wear SJCS monogrammed, uniform pants (navy in grades 1-4, khaki in grades 5-8) or navy thigh logo sweatpants. Girls may wear navy, black or white solid tights under uniform jumper, shorts or pants. **Blouse or shirt must be tucked in at all times so belt or waistband is visible.**

Accessories: Plain navy, brown, or black belts without embellishments are required to be worn in grades 2-8. Jewelry and make-up are not appropriate for school. This includes nail polish and artificial nails. Religious medals on a simple chain and simple watches are not considered jewelry. Girls may wear post earrings (no dangles or loops). Boys may not wear earrings.

Hair: Hair must be neat at all times and must remain its natural color. Extreme hair cuts or hair styles will be judged appropriate or inappropriate by the administration. Boys may not have hair touching their eyebrows, ears, or shirt collar. Only simple hair ornaments are allowed in girls' hair. No bows other than school uniform bows. Beaded braids in hair are not allowed.

TUITION COMMITMENT FORM

(Please choose one of the following):

_____ **Tuition Level I:** Non-Catholic families and Catholic families who seek no assistance.

_____ **Tuition Level II:** Affiliated Catholic families who wish to apply for assistance.

All Level II Catholic families must complete assistance evaluation on-line to determine tuition rate and have the assurance of their pastor that they are affiliated with their parish by having this form signed below by the pastor or his representative. (See bottom of form)

Tuition and application fees are non- refundable.

Families are required to register for FACTS Tuition Management. <https://factsmgt.com/> prior to student beginning class.

Payment Options

VPK (Must be 4 on or before September 1st) & PK4

Annually

_____ 1. Monday through Friday	7:45.m. - 11:00 a.m.	\$0.00
_____ 2. Monday through Friday	11:45a.m. - 3:00 p.m.	\$0.00
_____ 3. Monday through Friday	8:00 a.m. – 3:00 p.m.	\$4,000.00

PK3 or PK4 (Non VPK)

_____ 1. Monday through Friday	8:00 a.m. – 11:15 a.m.	\$2,800.00
_____ 2. Monday through Friday	8:00a.m. -12:00 p.m.	\$3,300.00
_____ 3. Monday through Friday	8:00 a.m. – 3:00 p.m.	\$6,995.00

Student Name(s) _____

The authorization hereunder is to remain in effect until my/our obligation to SJCS for tuition has been satisfied.

PARENT CONSENT:

I agree to the tuition policy as adopted by the School Board of SJCS and the rules and regulations of SJCS as stated in the Parent-Student Handbook. Your signature will be considered a pledge to fulfill this obligation.

Date _____ Father's Signature _____ Mother's Signature _____

Pastor Consent for Tuition Level II: I confirm eligibility for Tuition Level II.

Parish Volunteer Commitment: Present _____ Future _____

Date _____ Pastor's Signature _____ Parish _____

(Required for those seeking assistance from their parish)

Application/Emergency Form 2020-2021

Saint Joseph Catholic School

OFFICE USE: Application Fee: _____ Registration Fee: _____ Material/Digital Fee: _____

Student's Name _____ Grade _____
Last First Middle

Home Phone # _____ Gender M/F _____

Student lives with: Mom/Dad () Mother () Father () Mom/Step-Dad () Dad/Step-Mom () Other ()

Ethnicity: American Indian/Native Alaskan _____ African American _____ Hispanic _____ Asian/Pacific Islander _____

White _____ Other _____ Birth: _____
Date City State

Religion: _____ Registered Parish _____

_____ Baptism Date _____ Communion Date _____ Confirmation Date _____ Reconciliation Date _____

Last School Attended: _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Does the child need any special learning needs or require accommodations in the classroom environment? Yes No

Does the child have any IEP in place for his learning needs? Yes No

If yes to either question please explain why: _____

How did you hear about us?

Does the student have a first language other than English? Yes No If yes, what language? _____

Next Gen Ad _____ Flyer _____ Church Bulletin (what parish) _____ Other _____

Is the child toilet trained? (PK-K) Yes No Working on it

List any brothers or sisters who attend Saint Joseph Catholic School _____

Father/Guardian Name _____
Title (Dr., Ms., Mrs.) _____ Last First _____ Cell Phone _____ Additional Report Y/N _____

Address (If different than above) _____ City _____ Zip _____

Father/Guardian Employer _____ Work Phone # _____

Phone Number: _____ E-Mail: _____

Mother/Guardian Name _____
Title (Dr., Ms., Mrs.) _____ Last First _____ Cell Phone _____ Additional Report Card Y/N _____

Address (If different than above) _____ City _____ Zip _____

Mother/Guardians Employer _____ Work Phone # _____

Phone Number: _____ E-Mail: _____

Family Doctor _____ Phone _____

Hospital Preference _____ Phone _____

Please list in order who you would like us to call for an illness or emergency.

1st _____ 2nd _____ 3rd _____

Phone _____ Phone _____ Phone _____

Please list the names of any additional persons allowed to pick up the above child for illness and/or car pick up. Please notify us of any change. We will not release any student to anyone who is not listed below.

HEALTH INFORMATION: List any significant facts concerning the above child such as asthma, serious illness and allergies.

Responsibility for EMERGENCY TREATMENT will be assumed by the parent:

Full Disclosure Statement

In order to be considered for admission into Saint Joseph Catholic School, **full disclosure** is required of the student's academic standing, behavioral conditions and history, medical conditions and history, and legal custody situation (additional information may be requested). I certify that I have made honest and complete disclosure in all areas, and that I understand that I must keep the school informed of any changes in the student's situation in these areas immediately. Failure to do so could result in immediate loss of enrollment for my child at the school. I further certify that I have legal authority to sign this form and enroll this student in the school upon an offer of admission.

Print Name _____ Relationship to Student _____

Signature _____ Date _____

Print Name _____ Relationship to Student _____

Signature _____ Date _____



DIOCESE OF VENICE IN FLORIDA

MEDICAL AUTHORIZATION FOR MINOR

NAME OF MINOR: _____ D.O.B. _____

PARISH/SCHOOL: _____

HOME ADDRESS: _____

PARENTS/GUARDIANS: _____ / _____

PHONE #s: CELL: _____ HOME: _____

WORK: _____

EMERGENCY CONTACT: _____

PHONE: _____

MEDICAL INFORMATION: Please list all pertinent medical information (for example, allergies, medications, physical impairments, or any other information necessary in an emergency situation). Explain fully:

In case of illness or injury of the above student, reasonable effort will be made to contact the parent(s)/legal guardian(s)/emergency contact. In case of a medical emergency, 911 will be called. In the event that the parents/ legal guardian(s)/emergency contact cannot be notified or are not available, I (we) authorize parish, school, or other pertinent diocesan officials to consent to any x-ray examination, anesthetic, medical or surgical treatment, and/or hospital care, as determined to be necessary and appropriate by a licensed physician in the State of Florida. This authorization is valid for a period of 1 year from the date of execution.

Signature of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date
