



ST. JOSEPH SCHOOL

PROVIDING CATHOLIC EDUCATION SINCE 1891

ST. JOSEPH SCHOOL SETS Pre-K REGISTRATION for the 2020-2021 SCHOOL YEAR

St. Joseph School will begin registration for new Pre-K students for the 2020-2021 school year beginning March 23 through April 30th.

For new enrollees, parents and students are required to participate in an interview with the principal and their teacher prior to registration. Parents are also required to present the student's complete immunization record and baptismal and/or official birth certificates. No child will be completely registered unless all of these documents are included with registration.

For current SJS students, forms will be sent home in the folders for the parents.

A registration fee of \$150 per student will be required. After the deadline of April 30th, the registration fee will be \$250. We encourage all parents of new and current students to register the students before April 30th.

Visit www.stj Catholicschool.com for more information.

St. Joseph School admits students of any religion, race, color, and national or ethnic origin.

ST. JOSEPH CATHOLIC SCHOOL
PRE-KINDERGARTEN TUITION AND FEE STRUCTURE FOR 2020-2021

FEES

REGISTRATION (MARCH 23, 2020-APRIL 30, 2020)

Registration Fee (Not Refundable):	\$150.00	per Student
After April 30, 2020 for current students	\$250.00	per Student

FACTS FEE* (PAID THROUGH BANK DRAFT)\$ 45.00 per Family (Grades PreK-8)

*If a family has a child in Pre-K and children in grades K-8 at St. Joseph Catholic School, they pay only one FACTS setup fee.

TUITION

All tuition is either paid in full on or before August 30th or collected through FACTS.

Tuition Options

- Option #1** Pay the entire annual tuition on or before Aug. 30, 2020 do not pay the FACTS setup fee of \$45.00. Family saves a total of \$45.00
- Option #2** Pay the FACTS setup fee of \$45.00 (through bank draft).
Pay tuition in 10 payments (Aug-May).
- Option #3** Pay the FACTS setup fee (through bank draft).
Pay tuition in 11 payments (Aug-June).

Daily (8:00 am -3:30 pm)

One Child in Pre-K: \$4,000 per year or \$400 per month (10 months), \$363.64 per month (11 months)
Two Children in Pre-K: \$6,000 per year or \$600 per month (10 mos.) \$545.45 per month (11 mos.)
For Children in Pre-K and K-8, see the school office for tuition rate

ST. JOSEPH CATHOLIC SCHOOL
3K-4K ADDENDUM TO REGISTRATION

PARENT'S NAME _____

ADDRESS _____

HOME PHONE # _____ WORK PHONE# _____

CHURCH PARISH _____ CELL PHONE# _____

STUDENT'S NAME	AGE	DATE OF BIRTH	INDICATE 3K OR 4K
_____	_____	_____	_____
_____	_____	_____	_____

\$150 PER CHILD REGISTRATION FEE ATTACHED _____

DAILY ATTENDANCE (8:00 am -3:30 pm)

\$4,000 per year or \$400 per month (10 months), \$363.64 per month (11 months)
Two Children in Pre-K: \$6,000 per year or \$600 per month (10 mos.) \$545.45 per month (11 mos.)
For Children in Pre-K and K-8, see the school office for tuition rate

ST. JOSEPH SCHOOL REGISTRATION FORM/NEW STUDENTS

DATE _____

STUDENT _____ BOY _____ GIRL _____ AGE _____
LAST FIRST MIDDLE

D.O.B. _____ U.S. CITIZEN _____ COUNTRY OF BIRTH _____
M/D/Y

HOME ADDRESS _____
STREET CITY ZIP CODE

LANGUAGES SPOKEN AT HOME _____ PHONE # _____

STUDENT'S RELIGION _____ CHURCH ATTENDING _____

FATHER'S NAME _____ SINGLE SEPARATED MARRIED
DECEASED REMARRIED DIVORCED

OCCUPATION _____ RELIGION _____

BUSINESS ADDRESS _____ PHONE # _____

FATHER'S EDUCATION: HIGH SCHOOL COLLEGE BACHELOR'S DEGREE ADVANCED DEGREE OTHER

MOTHER'S NAME _____ SINGLE SEPARATED MARRIED
DECEASED REMARRIED DIVORCED

OCCUPATION _____ RELIGION _____

BUSINESS ADDRESS _____ PHONE # _____

MOTHER'S EDUCATION: HIGH SCHOOL COLLEGE BACHELOR'S DEGREE ADVANCED DEGREE OTHER

GUARDIAN _____ RELATIONSHIP TO STUDENT _____

ADDRESS _____ PHONE # _____

STUDENT'S LEGAL ADDRESS _____

NUMBER OF CHILDREN IN FAMILY: STREET _____ BOY(S) CITY _____ GIRL(S) ZIP CODE _____ SIBLING RANK _____

PUBLIC SCHOOL DISTRICT TO WHICH CHILD BELONGS _____

PUBLIC SCHOOL WHICH STUDENT WOULD ATTEND _____

DISTRICT NUMBER _____ COUNTY _____ DATE OF ENTRY _____

ENTERING GRADE _____ TRANSFERRED FROM _____

	BAPTISM	FIRST COMMUNION	CONFIRMATION
CHURCH			
DATE			
CITY/STATE			

ADDENDUM TO THE REGISTRATION FORM

Describe any tutoring or special education programs the child is receiving or has received.

Describe any special needs of the child of which the school should be aware. (Educational, health, etc.)

Name(s) of children in the family and name of school each attends.

Name _____	School _____
Name _____	School _____
Name _____	School _____
Name _____	School _____

Parent / Guardian Signature

Please return completed form to:

You will receive a phone call to arrange an interview.

School: _____

Dear Parent:

Each year the Office of Catholic Schools as well as each individual school is required to provide information to the National Catholic Education Association pertaining to the racial/ethnic demographics of our students. It is not the place of school officials to designate individuals. It is appropriate that parents designate the one category among those listed below that best describes their family background. Please assist us by providing the required information on this form.

Thank you for choosing to educate your child/children in a Catholic school in the Diocese of Victoria.

Sincerely,



John E. Quarry
Superintendent of Schools

- Asian:** identifies as having origins in Far East, Southeast Asia or Indian Sub-continent: (Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Philippines, Thailand, Vietnam, etc.)
- American Indian/Native American:** identifies as one of the two classifications of native Americans
- Black/African American:** identifies as black whether from the U.S., Africa or other parts of the world
- Hispanic:** identifies as of Hispanic origin
- Native Hawaiian/Other Pacific Islander:** includes native Hawaiians living anywhere in the U.S. (but not non-Hawaiian residents of Hawaii); also includes other Pacific Islands: Guam, Samoa, Fiji, Micronesia, Polynesia
- White:** Caucasian from any part of the world (including Middle East) that does not identify as one of the other groups
- Multi-racial:** person belongs to more than one racial group

Family Name: _____

Name(s) of children enrolled in this school:

TUITION PAYMENT PREFERENCE FORM

For new students
St. Joseph Catholic School

Parent/Guardian's Name _____

Address _____

City _____ State _____ Zip Code _____

Tuition for the 2020-2021 school year will be paid as follows:

Payment in full

_____ This payment, due by August 30, 2020 is made directly to the school.
You will not pay the \$ 45 FACTS fee.

Payment through FACTS

_____ Automatic Bank Payments

Payments are made over _____ 10 months Aug-May
_____ 11 months Aug-June

Payment is made through the bank account you designate (either checking or savings) on either the 5th or 20th of the month. There is a \$ 45 annual enrollment fee for this service. Families will need to electronically enroll online and when doing so the \$45 will be deducted electronically within 14 days after enrolling.

This payment and preference form needs to be turned in with the registration fee and registration papers.

I agree to make tuition payments for the 2020-2021 school year according to the option I have selected.

Parent's Signature

Date

If you have any questions, please contact the school office at 293-9000