



Diocese of Arlington
Application for Admission
Our Lady of Good Counsel School



Application Date _____

School Year _____

Preschool: Students must be 3 years of age or older by September 30.

- 3 year old 5 full days 5 ½ days Extended Stay
 PreK 5 full days 5 ½ days Extended Stay

STUDENT DATA

Legal Name: Last _____ First _____ Middle _____ Nickname _____

Sex _____ Date of Birth _____ City & State of Birth _____ Country of Birth (if outside U.S.) _____

Home Address _____ City _____ State _____ Zip _____

Cell Phone _____ Email where official school communication can be sent _____

Primary Language spoken in the home _____

Religion: _____ Baptized? yes no (If not baptized at OLGC, provide copy of certificate.)

Only child at this school? yes no Name & grade of sibling(s) at OLGC _____

Previous Schools Attended:

<u>Name of School</u>	<u>Dates</u>	<u>Grades</u>	<u>City, State</u>

Public School System in which student resides: Fairfax County Public Schools Other (specify) _____

If attending public school, my child would attend: _____

For Catholic Applicants

	<u>Date</u>	<u>Church</u>	<u>City, State</u>
Baptism	_____	_____	_____
Reconciliation	_____	_____	_____
First Eucharist	_____	_____	_____
Confirmation	_____	_____	_____
Parish currently registered at:	_____	_____	_____

FAMILY BACKGROUND

Student lives with: Both Parents Mother Father Guardian

Mother/Female Guardian

Father/Male Guardian

Full Legal Name

Maiden Name

Country of Birth

Home Address

Home Phone

Work Phone

Cell Phone

Work Email

Personal Email

Occupation

Employer

Religion

Parish

Marital Status

Married Separated Divorced* Widowed Single Remarried

Married Separated Divorced* Widowed Single Remarried

*Note: In the event of a divorce, decree of custody must be filed in the school office, as well as any specific instructions regarding release of the child to a parent.

Person responsible for tuition/fees payment:

Name

Address

Check all that apply: Only child at this school? yes no Oldest child at this school? yes no If not oldest, name & grade of oldest sibling at OLCG _____

The following information regarding ethnicity is optional and confidential. The information is used for our applications federal grants and the National Catholic Educational Association's (NCEA) annual statistical analysis of Catholic schools in the United States. Please make a selection for **both** ethnicity and race.

Student's Ethnicity: Hispanic/Latino Other

Student's Race: American Indian/Native Alaskan Native Hawaiian/Pacific Islander Black Asian White Multi-Racial

To be considered for admission, the following must accompany this application:

1. Non-refundable **Tuition Deposit** of \$500 (If we are unable to accept your child, your deposit will be refunded.)
2. Copy of **Baptismal Certificate** (if baptized in any faith), Reconciliation and Eucharist certificates (if applicable)
3. Copy of **Birth Certificate** – Original must be presented to school personnel for verification once the child is accepted.
4. **Proof of Exact Dates of Immunization**
5. Copy of your student's **Individualized Education Plan (IEP), 504 Plan, Special Education Child Study minutes, and/or a Student Assistance Plan (SAP), if applicable.** (We may request additional information from you to assist in determining if we can provide reasonable accommodations and an appropriate education for your child.)
6. If your child has ever been suspended, dismissed, expelled, or not permitted to re-enroll at a school, please provide the name of the school and explain the reasons on a separate sheet of paper.
7. **Custody Decree** (if applicable)

I certify the information provided in this document to be true and accurate to the best of my knowledge.

Printed Name of Parent/Guardian

Date

Signature of Parent/Guardian

DEMOGRAPHIC DATA

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OFFICE USE ONLY

Application Date _____
Baptismal Certificate _____
Records Release _____
Catholic _____
Registered Member of OLGC Parish _____
Disposition of Application: _____

Application Fee _____
Immunization Record _____
Report Cards _____
Non-Catholic _____
IEP/SAP/504 _____

Birth Certificate _____
Physical Form _____
Test Scores _____
Custody Decree _____

