



FR. SAUER ACADEMY

APPLICATION PROCESS AND MATERIALS CHECKLIST

We are delighted that you are interested submitting an application for 6th grade, Academic School Year 2024–2025 school year at the Fr. Sauer Academy. Here is a timeline and checklist to ensure that your application is complete and submitted on time for consideration.

1

IMPORTANT DATES FOR THE FR. SAUER ACADEMY APPLICATION PROCESS:

**September 11, 2023—
January 29, 2024** Applications can be picked up in person at our Main Office or at the front desk of St. Ignatius College Preparatory. It can also be downloaded on our website at www.siprep.org/academy/apply.

January 8, 2024 Priority Application and TADS Submission Deadline (Priority Group).

January 20 and February 3, 2024 FSA Placement Exam (9:00 am–12 pm).

January 29, 2024 Final Application and TADS Submission Deadline (Second Group).

February 16, 2024 Parent/Guardian and Student Interviews scheduled on a rolling basis.

March 1, 2024 Notification of Acceptance letters sent to families.

2

TO ENSURE THAT YOUR CHILD'S APPLICATION IS CONSIDERED, PLEASE MAKE SURE THAT ALL OF THE FOLLOWING APPLICATION MATERIALS ARE COMPLETE AND SUBMITTED TOGETHER IN PERSON OR VIA MAIL:

- Application for Admission (pages 1–4)
- Birth certificate
- Current immunization record
- Current COVID-19 vaccination card
- Most recent 4th and 5th grade report card
- Most recent standardized test (4th and 5th grade District Assessments)
- Recent photo of the student or family photo
- Family Financial Aid Information Form
- 2022 Federal Tax Return (Form 1040) and 2023 W2 Forms (or 2023 Tax Return)**

3

PLEASE RETURN THE APPLICATION FORM AND DOCUMENTS LISTED IN STEP NUMBER 2 TO:

FR. SAUER ACADEMY
Attention: Ms. Robles
2001 37th Avenue
San Francisco, CA 94116

***If Federal Income taxes were not filed, please submit any of the following documentation of benefits:*

- CalWorks (AFDC) (2023)
- Social Security or Foster Care Benefits
- Unemployment/Disability or Retirement Benefits (2023)
- Workers Compensation (2023)
- Letter of Notification for Approval for Free/Reduced Lunch from SFUSD



APPLICATION FOR ADMISSION

Student's Name _____ Current Grade _____
First Middle Last

Street Address _____

City, State, Zip Code _____

Gender _____ Date of Birth _____
Month Day Year

Student Cell Phone _____

Religion _____ Parish/Church _____

Home Language _____ Language(s) Student Reads and Writes _____

Ethnic Background (Optional) Please Identify Your Ethnic Background/Origin: (For Example: Asian, Latino, Caucasian, African American, Filipino, Etc.)

FAMILY INFORMATION

	MOTHER/GUARDIAN 1	FATHER/GUARDIAN 2
Name		
Address		
Home Phone		
Cell Phone		
Work Phone		
Email Address		
Occupation		
Employer		
Primary Language		
Other Languages Spoken		

PLEASE CHECK IF APPROPRIATE: Parents Married Father Deceased Mother Deceased
 Parents Separated/Divorced Father Remarried Mother Remarried
 Single Parent Legal Guardian

Student lives with: _____ Relationship: _____

	NAME	AGE	GRADE	SCHOOL
Please list any brothers and sisters:				

STUDENT NAME: _____ PAGE 1/4

FINANCIAL INFORMATION

The Fr. Sauer Academy exists to support under-served students; family income is, therefore, a consideration for acceptance. In order for an application to be considered, you must submit 2022 income tax return (1040 or equivalent) and your 2023 W-2's (or 2023 Tax Return) as attachments along with the application forms. If you did not file Federal Income taxes, any of the following documentation of benefits you receive must be submitted: CalWorks (AFDC) (2022 or 2023), Social Security or Foster Care Benefits, Unemployment/Disability or Retirement Benefits (2022/2023), Workers Compensation (2022/2023), and/or the Notification for Approval for Free/Reduced Lunch.

Annual Family Income _____ Number of Dependents _____

EDUCATIONAL INFORMATION

Current School _____

School Address _____

School Phone Number (_____) School Email Address _____

Principal _____

Other Schools Attended _____

Name of School

Grade

Dates Attended

Does the student receive any school-related support services? Yes No If yes, please check all those that apply:

- | | | |
|---|---|--|
| <input type="checkbox"/> Counseling (school) | <input type="checkbox"/> Resource Room | <input type="checkbox"/> Speech/language therapy |
| <input type="checkbox"/> Counseling (outside school) | <input type="checkbox"/> ELD (English Language Development) | <input type="checkbox"/> Title I Remedial Math |
| <input type="checkbox"/> Title I Remedial Reading | <input type="checkbox"/> Special Education | |
| <input type="checkbox"/> Other (please specify) _____ | | |

Is there any illness or disability that impacts the student's studies or participation in school activities such as physical education?

Yes No

If yes, please indicate what the illness or disability (asthma, dyslexia, etc.) is and explain.

FR. SAUER ACADEMY

Has the student ever repeated a grade? Yes No If yes, please specify grade: _____

Has the student ever been suspended or expelled from school? Yes No If yes, please explain below.

STUDENT STATEMENT (IN HIS/HER OWN HANDWRITING)

State in your own words why you want to attend the Fr. Sauer Academy.

List any academic awards or honors you have received: _____

I show kindness by: _____

How would you describe a good teacher? _____

How much time do you usually spend doing homework each night? _____

My friends would describe me as: _____

Anything else you would like to tell us? _____

List any activities/sports/clubs in which you are currently a participant. _____

What is your favorite activity? _____

Student Signature: _____ Date: _____

STUDENT NAME: _____ PAGE 3/4

PARENT/GUARDIAN STATEMENT OF INTENT

Please write a paragraph explaining why you want your child to attend the Fr. Sauer Academy. This paragraph may be written in the native language of a parent or guardian.

How did you hear about the Fr. Sauer Academy? _____

I understand that the Fr. Sauer Academy is part of St. Ignatius College Preparatory and an academically challenging school with a rigorous code of conduct and that full participation of parents or guardians is necessary in order to meet the requirements of the program.

Parent (Guardian) Signature: _____ Date: _____

Parent (Guardian) Signature: _____ Date: _____

Student Signature: _____ Date: _____

NON-DISCRIMINATION POLICY: *St. Ignatius College Preparatory, mindful of its mission to be witness to the love of Christ for all, admits students of any race, color, religion, and national and/or ethnic origin to all the rights, privileges, programs and activities generally accorded to or made available to students at the school. St. Ignatius College Preparatory does not unlawfully discriminate on the basis of race, color, religion, and national and/or ethnic origin, age, sex, or disability in the administration of educational policies, admissions policies, scholarships and loan programs, and athletic and other school-administered programs.*

ATTACHMENTS

Please attach the following items required for admission (the application will be considered when all items have been submitted):

- 1. Birth certificate
- 2. Current Immunization record
- 3. Current COVID-19 vaccination card
- 4. Most recent 4th and 5th grade report card
- 5. Most recent standardized test (4th Grade Smarter Balance Assessment is acceptable)
- 6. Recent photo of the student and a recent family photo
- 7. Free and reduced lunch form (if applicable)
- 8. 2022 Tax Returns and 2023 W2 Forms (or 2023 Tax Returns)
- 9. Submit TADS Application online for Fr. Sauer Academy scholarship (see page 2 of Family Financial Aid Information Form)

Please return this application form and required documents to:

FR. SAUER ACADEMY
ATTN: DEYANIRA ROBLES
2001 37th Avenue
San Francisco, CA 94116

STUDENT NAME: _____ PAGE 4/4



FAMILY FINANCIAL AID INFORMATION

Please complete and sign this application and include a copy of your **2022 Federal Tax Return and 2023 W2's (or 2023 Tax Return) for all Parents/Guardians.** Application is not complete without this form.
PLEASE PRINT CLEARLY AND NEATLY WITH A BALL POINT PEN

A Parent, Guardian or Other Adult *Residing with Student*

CIRCLE ONE: Mother Father Stepmother Stepfather Other Adult

Last Name _____ First Name _____ Middle _____

Address _____ Apt # _____ City _____ Zip Code _____ Make/Model/Year of Car _____

Home Phone Number _____ Cell Phone Number _____ Personal Email Address _____

Occupation/Title _____ Employed By _____ Work Phone Number _____ How Long? _____

Annual Salary _____ Other sources of income (retirement, disability, unemployment) and amount _____

B Parent, Guardian or Other Adult *Residing with Student*

CIRCLE ONE: Mother Father Stepmother Stepfather Other Adult

Last Name _____ First Name _____ Middle _____

Address _____ Apt # _____ City _____ Zip Code _____ Make/Model/Year of Car _____

Home Phone Number _____ Cell Phone Number _____ Personal Email Address _____

Occupation/Title _____ Employed By _____ Work Phone Number _____ How Long? _____

Annual Salary _____ Other sources of income (retirement, disability, unemployment) and amount _____

C Household Information

1. Number of individuals who will live in my/our household during the 2024–2025 school year

_____ Parents/Guardians _____ Children _____ Others

*If others, please explain. _____

2. Current marital status/housing arrangement of Parent/Guardian A:

Single, never married Residing w/ Significant Other Married Separated Divorced Divorced/remarried Widowed

Other: _____

D Housing Information

RENT	_____	Monthly rental payment
	_____	Amount paid by household
	_____	Amount paid by others

OWN	_____	Monthly mortgage payment
	_____	Current Market Value
	_____	Amount still owed

Parent/Guardian Signature: _____ Date: _____

Student Name: _____

FAMILY FINANCIAL AID INFORMATION FORM *(continued)*

Please complete and sign this application and include a copy of your **2022 Federal Tax Return and 2023 W2's (or 2023 Tax Return) for all Parents/Guardians. Application is not complete without this form.**

PLEASE PRINT CLEARLY AND NEATLY WITH A BALL POINT PEN

<p>E Automobile Information</p> <p>1. Number of automobiles owned or leased: _____</p> <p>2. Total monthly payment for vehicle(s): _____</p>	<p>F Assets</p> <p>1. Amount of money in checking account: _____</p> <p>2. Amount of money in savings account: _____</p> <p>3. Amount of cash on hand: _____</p>
<p>G Retirement Plans</p> <p>Personal monthly contribution to retirement plan: _____</p>	<p>H Medical Expenses</p> <p>1. Monthly payment toward insurance premium: _____</p> <p>2. Average monthly payment toward medical expenses (dental, prescription drugs, prescription eyewear): _____</p>

Process for TADS Application for Fr. Sauer Academy Scholarship:

1. Visit www.mytads.com and click on 'Financial Aid Assessment' to begin.
2. Login or create a new account.
3. Select your school (Fr. Sauer Academy) by clicking through the State/City/School dropdowns.
4. Complete and submit your application (the information that you filled out on this Family Financial Aid Form will be helpful).
5. Submit documentation to TADS (1040 Form, etc).
6. TADS will contact you with requests for clarification or other required documentation.

Should you need assistance, you can call or email
TADS support at +1 (800) 477-TADS ext. 8237 or support@tads.com.

If you need additional assistance, please call or stop by the
Fr. Sauer Academy office at (415) 731-7500 ext. 5030.



CONFIDENTIAL TEACHER OBSERVATION FORM

MUST BE COMPLETED BY CURRENT 5TH GRADE HOMEROOM TEACHER

The Fr. Sauer Academy is a unique school which offers a high-quality Jesuit education, with the goal of preparing students to enter St. Ignatius College Preparatory. We are dedicated to supporting under-served students who have the potential and desire to maximize their God-given gifts. By creating an atmosphere for academic, emotional, and spiritual growth, we aim to develop thoughtful, articulate, sensitive, and aware scholars with a strong sense of self-worth. The Fr. Sauer Academy students carry a full academic schedule and remain at school until 3:00 pm. Additionally, the Academy will arrange safe transportation for students to school and back home each day. Please go to www.siprep.org/academy for more information about the Fr. Sauer Academy prior to completing this observation form.

Thank you for your time and effort in sharing your professional insights about this student. It is a critical component in the overall application process. If you know of other students who you believe would benefit from a Fr. Sauer Academy education, please have them call us at 415.731.7500 ext. 5030.

Student's Name _____

How long have you known this student? _____

In what capacity: _____

Please rate the student in the following criteria by checking the appropriate box.

	Always	Often	Sometimes	Rarely
Student arrives prepared for class				
Student works to ability				
Student completes assignments on time				
Student asks questions when she/he needs help or is confused				
Student is inquisitive				
Student is a motivated learner				
Student shows respect for peers				
Student shows respect for adults				
Student is respected by peers				
Student demonstrates academic potential				
Student accepts responsibility for her/his behavior				
Student is able to verbalize/articulate thoughts well				

Please offer any further thoughts/explanations related to your answers above:

Please list any extra-curricular activities in which the student participates:

Current School: _____

Your Name: _____ Your Email Address: _____

Please e-mail this completed form to Deyanira Robles at drobles@siprep.org or mail it to:
St. Ignatius College Preparatory, ATTN: Deyanira Robles, 2001 37th Avenue, San Francisco, CA 94116.



AUTHORIZATION FORM FOR TRANSCRIPT OF STUDENT GRADES

**WITH THIS FORM, I AUTHORIZE THE SCHOOL TO SEND MY CHILD'S OFFICIAL
SCHOOL TRANSCRIPT, REPORT CARDS, STANDARDIZED TEST RESULTS,
ATTENDANCE AND HEALTH RECORDS (INCLUDING IMMUNIZATION RECORDS)
AND ALL OTHER RECORDS, (IEP'S, PSYCHOLOGICAL REPORTS, ETC.)
TO FR. SAUER ACADEMY.**

Student's Name

I hereby authorize _____ to immediately release a
Name of Current School

copy of the academic records of _____ to
Student's Name

Fr. Sauer Academy
Attention: Ms. Robles
2001 37th Avenue
San Francisco, CA 94116

Parent/Guardian Signature

Date

NOTE: if there are any questions regarding transcripts or the application process, please contact the Fr. Sauer Academy main office at 415-731-7500, ext 5030.

ATTENTION PARENTS: this form should be submitted directly to Fr. Sauer Academy. **DO NOT** submit this form to the student's current school. Fr. Sauer Academy will forward this to your child's school.