



# Saints Felicitas and Perpetua School

2955 Huntington Drive  
San Marino, CA 91108  
(626) 796-8223  
[www.ssf.org](http://www.ssf.org)

## **Application Packet**

1. Please complete the attached Application for Enrollment Form.
2. The "Request for Information Prior to Acceptance" sheet must be given to your present school for them to complete and return to us.
3. Please attach **copies** of the following:
  - Birth Certificate
    - (Transitional K student must be 4 years old on or before September 1st)
    - (Kindergarten student must be 5 years old on or before September 1st)
  - Baptism Certificate and First Holy Communion, if applicable
  - State of California (yellow) Immunization Record Card
  - Current Report Card
  - Achievement Test Scores from last grade (such as Stanford or CTBS)

and also return

- \$75.00 check for Application/Testing Fee (non-refundable) made payable to: SSFP School
- Child Custody Form
- Parent/Guardian Questionnaire

This application cannot be processed unless all of the above information is attached and returned to the school office. Return completed paper work as soon as possible. Testing is by appointment. We will notify you of the testing day and time, so please make sure both work and home phone numbers, or cell phone numbers, are correctly listed.

All students will be tested for entrance. Parents and child will be invited to interview with the principal. After your child(ren) is/are accepted into our school, we request **immediate payment of the following non-refundable Fees:**

- |   |                      |
|---|----------------------|
| <input type="checkbox"/> Enrollment Fee ( <i>annual</i> )               | \$100.00 per student |
| <input type="checkbox"/> Comprehensive Fee ( <i>annual</i> )            | \$450.00 per student |
| <input type="checkbox"/> PSO Membership Fee ( <i>annual</i> )           | \$100.00 per family  |
| <input type="checkbox"/> Transitional Kinder / Kindergarten Student Fee | \$ 60.00 per student |

***Thank you for your interest in our school.  
If you have any questions, please feel free to call the school office at  
(626) 796-8223, any weekday between 8:00 am and 3:30 pm.***



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## Application for Enrollment

Date: \_\_\_\_\_ Grade level in September: \_\_\_\_\_ Sex  M  F

**Students applying for TK MUST be 4 years old on or before September 1st**  
**Students applying for Kindergarten MUST be 5 years old on or before September 1st**

### Student Information

<b>Last Name:</b>	<b>First:</b>	<b>Middle:</b>
Date of Birth:	Place of Birth:	Religion:
Address:		
City:	State:	Zip:
Home Phone:		
Name of school presently attending :		
Address:		
Phone :		

### Family Information

<b>Father's Last Name:</b>	<b>First:</b>	<b>Middle:</b>
Father's Birthplace:		
Address:	City:	State: Zip:
Occupation:	Employer:	
Work Phone:	Cell phone:	Religion:
<b>Mother's Last Name:</b>	<b>First:</b>	<b>Middle:</b>
Mother's Birthplace:	Maiden Name:	
Address:	City:	State: Zip:
Occupation:	Employer:	
Work Phone:	Cell phone:	Religion:
Family Email Address:		

### Religious Information

**Please attach Certificate(s)**

Baptism Date:	Church:	City/State/Zip:
Reconciliation Date:	Church:	City/State/Zip:
First Communion Date:	Church:	City/State/Zip:

### Parish Information

Are you a resident in this Parish:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, are you registered at the rectory:	<input type="checkbox"/> Yes	<input type="checkbox"/> No Saints Felicitas & Perpetua Envelope Number is:
If not, in what Parish do you reside?		

**\$75.00 Application/Testing fee is non-refundable**

**Check # \_\_\_\_\_ Date Paid \_\_\_\_\_**

Yes, I have taken the "Request for Information Prior to Acceptance" form to the student's present school.

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## CHILD CUSTODY INFORMATION

PLEASE SIGN THIS BOX IF THIS DOES NOT APPLY TO YOUR FAMILY.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

*The information requested below is necessary for a child who does not live with **both natural parents** due to separation or divorce. The parent with whom the child lives is the custodial parent. Natural parents have equal access to the child and his/her school information unless a written court order prohibits it.*

1. Child's name \_\_\_\_\_

2. Name of the custodial parent with whom the child resides:

\_\_\_\_\_

3. Name and address (if known) of non-custodial parent:

\_\_\_\_\_

4. Do you have legal custody through a court order?

Yes  No  Pending (date finalization expected \_\_\_\_\_)

Explain your type of custody (e.g. sole, primary, joint/shared, etc.):

\_\_\_\_\_

5. If there is a court order, does it limit the non-custodial parent's access to school records?

Yes  No

6. If yes, a copy of the court order must be placed in the child's school file.

*Copy will be provided.*  Yes

7. May the child be released from school to the non-custodial parent?  Yes  No

8. Will you provide the non-custodial parent, on a regular basis, with progress information about the child, such as report cards and conference reports?  Yes  No

9. Please provide any additional information regarding the custody of your child which you think the school should know on the back of this form.

\_\_\_\_\_  
Signature of Custodial Parent or Legal Guardian

\_\_\_\_\_  
Date

# Saints Felicitas and Perpetua School

## Parent/Guardian Questionnaire

Please return questionnaire with application

Family Name: \_\_\_\_\_

Child(ren) Names and Candidate for Grades:

\_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_

Why do you wish to enroll your children in Saints Felicitas and Perpetua School?

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# Saints Felicitas and Perpetua School

2955 Huntington Drive  
San Marino, CA 91108-2222  
(626) 796-8223

REQUEST FOR INFORMATION PRIOR TO ACCEPTANCE FOR  
KINDERGARTEN · FIRST GRADE

**Please complete the upper portion and have your child's present school complete the lower part and mail to Saints Felicitas and Perpetua School.**

Name: \_\_\_\_\_ Present Grade \_\_\_\_\_

Address/City: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name of school currently attending: \_\_\_\_\_

City: \_\_\_\_\_ Length of time in this school: \_\_\_\_\_

**Signature of parent/guardian:** \_\_\_\_\_

**School Personnel-Kindly mail directly to the school: CONFIDENTIAL**

TO THE PRINCIPAL OR TEACHER: Thank you very much for your assistance. Your remarks will be held in the strictest confidence and will be most appreciated as we begin our review of the applicant's personal characteristics and academic credentials. Please return this form to Saints Felicitas and Perpetua School as soon as possible. Attention Principal.

Social & Emotional Development	Mature	Age Appropriate	Needs Development	Immature
Listens				
Cooperates				
Relates to peers				
Relates to adults				
Exhibits self-confidence				
Adjusts to transitions				
Attendance at School				
Tolerates frustrations				
Separates from parents				
Shares materials and possessions				
Functions independently				
Asks for help when needed				
Comments				
<b>Physical Development</b>				
Fine motor control				
Gross motor control				
Handedness established				

Cognitive Development	Mature	Age Appropriate	Needs Development	Immature
Expresses ideas orally				
Articulates clearly				
Sustains attention in small groups				
Sustains attention in large groups				
Grasps concepts				
Recalls details				
Demonstrates an interest in learning				
Interacts with materials				
Follows directions				

Do you feel this child is ready for a full day of school?  Yes  No

Comments: \_\_\_\_\_  
 \_\_\_\_\_

How would you describe this child \_\_\_\_\_  
 \_\_\_\_\_

Family Information	Consistently	Usually	Sometimes	Rarely
Communicates openly with school				
Participates in school activities				
Cooperates with classroom teachers				
Cooperates with administration				
Follows the rules and policies of the school				
Has realistic expectations for their child				
Meets financial obligations in a timely manner				
Comments				

Signature \_\_\_\_\_ Name (Please print name)

Title or position \_\_\_\_\_ Telephone

How long have you known this child? \_\_\_\_\_ Date

Your judgments are used solely for the admissions process and are held in strictest confidence.  
 We thank you in advance for the help your comments provide.

# Saints Felicitas and Perpetua School

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REQUEST FOR INFORMATION PRIOR TO ACCEPTANCE FOR GRADES TWO TO EIGHT
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**Please complete the upper portion and have your child's present school complete the lower part and mail to Saints Felicitas and Perpetua School.**

Name: \_\_\_\_\_ Present Grade \_\_\_\_\_

Address/City: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Name of school currently attending: \_\_\_\_\_

City: \_\_\_\_\_ Length of time in this school: \_\_\_\_\_

**Signature of parent/guardian:** \_\_\_\_\_

**School Personnel-Kindly mail directly to the school:      CONFIDENTIAL**

TO THE PRINCIPAL OR TEACHER: Thank you very much for your assistance. Your remarks will be held in the strictest confidence and will be most appreciated as we begin our review of the applicant's personal characteristics and academic credentials. Please return this form to Saints Felicitas and Perpetua School as soon as possible. Attention Principal.

ACADEMIC ASSESSMENT	EXCELLENT	GOOD AVERAGE	BELOW AVERAGE
Motivation			
Creative Qualities			
Self-Discipline			
Growth Potential			
Achievement			
Ability in Relation to Achievement			
Attendance at School			
Lates			
CHARACTER ASSESSMENT	EXCELLENT	GOOD AVERAGE	BELOW AVERAGE
Leadership			
Self-confidence			
Warmth of Personality			
Sense of Humor			
Emotional Maturity			
Personal Initiative			
Reaction to Setbacks			
Respect Accorded by Faculty			
Ability to Work with Others			
Relationship with Teachers			
Relationship with Peers			

If this student were to reapply to your school, would you grant acceptance? \_\_\_\_\_

Please comment regarding Discipline and Effort:

\_\_\_\_\_

Please check more than one, if applicable:

- \_\_\_\_\_ Parents/ Guardians meet financial obligations.
- \_\_\_\_\_ Parents/Guardians have difficulty meeting financial obligations.
- \_\_\_\_\_ Parents/Guardians fail to meet financial obligations.
- \_\_\_\_\_ Parents/Guardians support school sponsored activities.
- \_\_\_\_\_ Parents/Guardians do not support school-sponsored activities.

Please mark the student's performance in the following areas as

- 1 Outstanding
- 2 Satisfactory Progress
- 3 Below Average Progress
- N/A Not given at this School

_____ Religion	_____ Reading/Literature	_____ English
_____ Math	_____ Science	_____ Social Studies
_____ Spelling	_____ Homework	_____ Computers
_____ Art	_____ Study Habits	_____ Cooperation
_____ P.E.	_____ Typing	_____ Conduct
_____ Music	_____ General Attitude	_____ Effort

Form completed by: \_\_\_\_\_ (Please print)

Title: \_\_\_\_\_ Phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please call the Principal directly if you would like to share any additional information.  
*Your judgments are used solely for the admissions process and are held in strictest confidence.  
 We thank you in advance for the help your comments provide.*