



## 2019-2020 New Student Registration Grades K-8

Thank you for your interest in Immaculate Heart of Mary School! Please visit our website at [www.ihomschool.org](http://www.ihomschool.org) to learn additional information about IHM. The month of February is reserved for registration. You may direct questions concerning registration to Admissions at 513-388-3020 or [Admissions@ihomschool.org](mailto:Admissions@ihomschool.org). Before a student can be considered for enrollment the following items **MUST** be received:

- 2019/2020 New Family Registration Form
- Grade K-8 New Student Data Form
- Parish Day School Registration Policy
- Tuition Payment Commitment Form
- Help Us Get to Know Your Child Form
- Teacher Recommendation Form (*parent gives to CURRENT school - their staff completes/sends to IHM*)
- Release of Records Form (*parent signs/returns to IHM - form used after enrollment confirmed and close to student's withdrawal date from current school*)
- Stewardship Commitment Form
- Long Range Planning Form
- Students entering K-8: Copies of current and previous standardized testing and report cards (*current year for K, current and past year for grade 1, current and past 2 years for 2-8*)... registration paperwork not accepted without this requirement
- Copy of Birth Certificate (Not necessary if child is current IHM Preschool student)
- If applicable:
  - Letter of good standing from a former parish (*if Immaculate Heart of Mary parishioner less than six months*)
  - Copy of custody court order (*in cases of divorce, adoption, foster parenting or other court-ordered custody*)
  - Please send all accommodation forms, ISP's, IEP's, 504's, comments, or any other useful information which would assist us in aiding the student in adjusting to this new situation.
  - If Catholic, copy of Baptismal Certificate (*unless baptized at Immaculate Heart of Mary Parish*)
  - If transferring from another Catholic or private school, attach a personal letter stating that your financial obligations to that school are current

**PARENTS OF INCOMING STUDENTS (GRADES K-8)** There is a mandatory assessment for all new students entering K and Grade 1. The assessment takes place in May. Current IHM Preschool students are given the assessment during their regular school day so their parents do not schedule an assessment time.

**TUITION ASSISTANCE** Our Tuition Assistance Policy is contained in this packet for Grades K-8, including directions on how to apply for tuition assistance. Please do not allow tuition to be the reason you do not enroll your child. There is tuition assistance available for active parishioners. All applications are handled by the business office and are kept confidential.

### **TO RETURN THE REGISTRATION PACKET**

- Drop off at the School Office as soon as all requirements are complete. School Office hours: 7:30 a.m. – 4:00 p.m.
- Fax to 513/388-3026 (not recommended for the month of July)
- Scan and e-mail to [admissions@ihomschool.org](mailto:admissions@ihomschool.org)
- Mail: Admissions, IHM School, 7800 Beechmont Avenue, Cincinnati OH 45255

### **REGISTRATION DEADLINES**

- Week of February 11<sup>th</sup>* Parish families with **new students whose siblings** have graduated from Immaculate Heart of Mary School and whose parents have remained active parishioners.
- Week of February 18<sup>th</sup>* Children of parish families who will be enrolling for the first time.
- Week of February 25<sup>th</sup>* Children whose families are parishioners at another Catholic Parish which does not have a school with the agreement of their pastor to pay the parish subsidy. Registration for children of non-parishioners.
- Week of March 4<sup>th</sup>* New students notified of acceptance.



## 2019/2020 TUITION FOR GRADES K-8

The Immaculate Heart of Mary Parish School serves the spiritual and educational needs of parishioners and others who support the value of a Catholic education for their children. As you know, school tuition does not cover the total cost of education here at Immaculate Heart of Mary Parish School. Part of the contributions made to the Sunday and Holyday offertory are used to support the school, one of the parish's largest ministries. Parish and School Administration, in consultation with the Parish Pastoral Council, the Education Commission, and the Administration & Finance Commission, determine the amount of tuition each year.

### 2019/2020 GRADE K - 8 TUITION

| Number of Children in Grades K-8 | Parishioner | Non-Parishioner <i>(Families who are not registered in the parish or registered families with no record of parish support)</i> |
|----------------------------------|-------------|--|
| 1                                | \$4,380*    | \$6,839*   |
| 2                                | \$8,322*    | \$13,678*  |
| 3                                | \$11,169*   | \$20,517*  |
| 4                                | \$13,140*   | \$27,356*  |
| 5 or more                        | \$14,235*   | \$6,839* per child   |

**\* In addition to the tuition number above a Technology Fee is added to the total amount due.**

**\$100 per child grades K – 5 and \$200 per child grades 6 - 8**

## 2019/2020 DEPOSIT

The deposit amount listed below is due with the Registration Forms. Deposit equals 10% of yearly tuition. Deposit can be paid by check made payable to IHM School or online at <https://ihom.weshareonline.org> Please select "2019-2020 IHM School Tuition Deposit"

| Number of Children in Grades K-8 | Parishioner<br>Deposit due at registration (by check) | Non-Parishioner<br>Deposit due at registration (by check) |
|----------------------------------|---|---|
| 1                                | \$438   | \$684   |
| 2                                | \$832   | \$1,368   |
| 3                                | \$1,117   | \$2,052   |
| 4                                | \$1,314   | \$2,736   |
| 5 or more                        | \$1,424   | \$684 per child   |

**A RETURNED CHECK FEE OF \$25 WILL BE CHARGED FOR RETURNED DEPOSIT CHECKS.  
RETURNED CHECKS WILL RESULT IN LOSS OF PLACEMENT FOR YOUR CHILD.**

## IMPORTANT TUITION PAYMENT OPTIONS FOR THE 2019 - 2020 SCHOOL YEAR

Immaculate Heart of Mary School offers **two** payment options: Payment **in full** by July 1, 2019 or nine monthly payments via FACTS Management. The FACTS Management Company serves over 4,000 schools nationwide and is the industry leader in tuition management for private and faith-based schools. If you choose to use the FACTS payment plan option, you will receive an email stating "online payment plan invite". It is imperative you follow the instructions in this email to get the payment plan established and activated.

- 1. Paying in Full – Due July 1, 2019** if you choose the single pay option on your registration form, the IHM Tuition Office will send you a statement in June 2019 and payment must be received by the parish office by Monday, July 1, 2019. For your convenience you may pay your tuition by credit card. An additional 3.50% convenience fee will be charged if you choose to pay with your credit card. Call Tammy Haynes at 388-4183 if you wish to pay by credit card. **If the full payment is not received by July 1, 2019 your account will be set up in FACTS and you will be charged the FACTS fee of \$43.**
  
- 2. Nine Monthly Automatic Withdrawal Payments via FACTS Management.**

On your registration form if you choose to budget your tuition payments through FACTS, an "online payment plan invite" will be emailed to you in June 2019. Once you receive that email, you **MUST** follow the instructions to get the payment plan established and activated. *Please Note: the FACTS fee of \$43 will be deducted as a separate charge within 14 days of the initial set up of the Facts account.* Once you have set up the online payment plan, you will be emailed an Agreement Confirmation Notice that will list the total balance due and the payment schedule – please verify this information is correct and keep for your records. If there are any discrepancies, please contact Tammy Haynes at 388-4183 or [tammyh@ihom.org](mailto:tammyh@ihom.org). The monthly payments will be withdrawn July 2019 through January 2020, February payment will be skipped, and then withdrawals resume in March and April 2020. You will be given a choice of withdrawal dates during the month:

  - A. Automatic payments are processed from your checking or savings account (ACH) on the 5<sup>th</sup> or the 20<sup>th</sup> of each month
  - B. Automatic payments are processed from your credit card (Discover, Amex, Visa or M/C) on the 5<sup>th</sup> or the 20<sup>th</sup> of each month. Note: a "convenience fee" (3.50%) will be applied for credit card payments.

**You must set up your monthly payments in order to complete your enrollment.**

## Immaculate Heart of Mary Parishioner Guidelines

IHM Parishioner status is described as: Families who regularly participate in parish religious practice and worship at Immaculate Heart of Mary Parish, or another parish from which they have recently moved, and have done so for a minimum of six months prior to registration including all of the following: **regular Sunday Mass attendance in the parish and use of envelopes (no minimum dollar amount required), support of all sacramental programs, participation in religious formation programs, a yearly stewardship pledge, volunteer time and talent in ministries and organizations associated with the school and/or parish and financial support of the church to the best of the family's ability.** Parishioner status will be reviewed on an annual basis.

### Tuition Assistance Policy for Parish Day School Families

Immaculate Heart of Mary Parish provides tuition assistance to help parish day school families attend the school. Active parishioners may apply for assistance by completing an application which is available online at <https://online.factsmgt.com/signin/3xhs0>.

The application will be processed by a third party company which will apply designated criteria in order to rank eligibility and determine dollar amounts available for assistance. The application must be submitted by specified dates, and eligibility for these financial grants will be determined by April 15, 2019. All parents registering for the next school year are expected to submit a tuition deposit during the February registration period, regardless of whether or not they are currently on financial assistance. If a financial crisis occurs during the course of a school year, parents will have an opportunity to complete an application for financial assistance at that time.

If financial circumstances change, prayerfully consider repaying the parish for the assistance you have received.

You may apply for tuition assistance on-line at <https://online.factsmgt.com/signin/3xhs0>. There is a processing fee of \$28. If you have any questions, please contact Tammy Haynes at 513-388-4183 or [tammyh@ihom.org](mailto:tammyh@ihom.org). The form, fees and supporting documentation must be completed by March 2, 2019. The entire matter is confidential. For information on the One Faith, One Hope, One Love tuition assistance please go to <http://catholicbestchoice.org/catholic-education-foundation>

If any step of the process is unclear, or if you have any questions about the tuition payment process, please do not hesitate to contact Tammy Haynes at [tammyh@ihom.org](mailto:tammyh@ihom.org) or 388-4183.

### Parish Day School Registration Policy

Families wishing to enroll their child(ren) at the Immaculate Heart of Mary Day School for the following academic school year are to remit a deposit which is due by the enrollment date appropriate for their status (e.g. returning students, new students/parishioners, new students/non-parishioners, etc.), and is set by the administration for each new academic year.

- (a) Families with a *demonstrated financial hardship* (as defined by the parish financial assistance policy) may request that other arrangements for the deposit be made. Such requests will be evaluated by the Pastor on a case-by-case basis, but must include a deposit of an agreed amount by the original date due and payment of the deposit must be completed by May 1. Failure to meet the agreed upon dates may result in the loss of your child(ren)'s place in the school.
- (b) Upon a formal request from the parents to the Principal before May 1, and evaluation by the Pastor, a deposit may be refunded provided that another student(s) is (are) available to take the vacated place(s).
- (c) After May 1, the deposit is non-refundable, except as follows:  
With sufficient cause, parents may petition the principal in writing for a refund after May 1 for an evaluation by the Pastor.  
*If a refund is granted at any time and for any reason, a processing fee of 15% may be assessed.*



I acknowledge that I have read all information included in this 2019/2020 registration packet, including the **Parishioner Guidelines, Tuition Assistance Policy** and the **Registration Policy**, and I agree to abide by them.

Name of parent(s) **{Please Print}** \_\_\_\_\_

Signature of parent(s) \_\_\_\_\_

| PLEASE DO NOT WRITE IN THIS SECTION (Office use only) |   |  |  |
|---|---|--|--|
| Date Deposit Rec'd                                    | <input type="checkbox"/> Regn Policy        | <input type="checkbox"/> Baptismal C         | <input type="checkbox"/> K-8 Rpt Cds             |
| \$ Amt  | <input type="checkbox"/> Tuition Commitment | <input type="checkbox"/> Birth C             | <input type="checkbox"/> 1-8 Testing             |
| Check #   | Grade Level/s _____                         | <input type="checkbox"/> Parent Survey       | <input type="checkbox"/> Parent Fin'l School Ltr |
| Initial/Date to PO                                    | <input type="checkbox"/> Student Data Form  | <input type="checkbox"/> Prin/Dir/Tcr Survey | <input type="checkbox"/> Parish Gd Stnd          |
|   | <input type="checkbox"/> Stewardship Survey | <input type="checkbox"/> Release of Records  | <input type="checkbox"/> Custody                 |
| <input type="checkbox"/> Enrollment Referral:         |   |  |  |

**BOTTOM SECTION RETURNED WITH COMPLETED REGISTRATION**



# Help Us Get To Know Your Child

This form is required for all incoming students.  
Return this survey with a snapshot of your child when you register

Student Name: \_\_\_\_\_ Student DOB: \_\_\_\_\_

1. Is your child currently enrolled in school? \_\_\_\_\_ If so, where? \_\_\_\_\_

2. Describe your child's current religious education. \_\_\_\_\_

3. Does your child currently have an accommodation OR 504 plan?  No  Yes  
\*\*If Yes, please provide copies of current plan with this form.

4. Does your child have a current IEP/ISP?  No  Yes  
\*\*If Yes, please provide copies of current plan with this form.

5. Has your child been on an IEP in the past but has been released?  No  Yes If so, when? \_\_\_\_\_

6. Has your child been identified as gifted?  No  Yes  
\*\*If yes, please include testing data which qualified your child.

7. Describe your child's strengths. \_\_\_\_\_

8. Describe any opportunity for growth your child may have. \_\_\_\_\_

9. Describe your child's interests. \_\_\_\_\_

10. Does your child participate in any organized groups or activities? \_\_\_\_\_

11. How many siblings does your child have? What are their names and ages? \_\_\_\_\_

12. What other information do you want us to know about your family? \_\_\_\_\_

**THIS PAGE RETURNED WITH COMPLETED REGISTRATION**



## Teacher Recommendation for Grades K - 8

(Parent of prospective student should give this form to the student's current school for completion)

Please complete this 2-page form and mail or fax to: Admissions, IHM School. DO NOT return this form to parent/s. This information is a necessary part of our admissions process and will be held in strict confidence. For students entering our Kindergarten, please skip any categories that are not applicable. We appreciate your time, honesty and cooperation.

Student's Name: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

### STUDENT EVALUATION

Has the student ever been suspended?  No  Yes (Please explain) \_\_\_\_\_

Has the student ever been expelled?  No  Yes (Please explain) \_\_\_\_\_

Please check all boxes that describe this student:

- |   |  |
|---|--|
| <input type="checkbox"/> Always Cooperative         | <input type="checkbox"/> Disruptive                    |
| <input type="checkbox"/> Positive Influence         | <input type="checkbox"/> Negative Influence            |
| <input type="checkbox"/> Engaged in Class           | <input type="checkbox"/> Unengaged in Class            |
| <input type="checkbox"/> Leader                     | <input type="checkbox"/> Follower                      |
| <input type="checkbox"/> Over-achiever              | <input type="checkbox"/> Irregular Achievement         |
| <input type="checkbox"/> Well Organized             | <input type="checkbox"/> Disorganized                  |
| <input type="checkbox"/> Works Better Independently | <input type="checkbox"/> Works Better in Group Setting |
| <input type="checkbox"/> Stays On Task              | <input type="checkbox"/> Easily Distracted             |

Describe the student's academic strengths:

---

---

---



Describe any opportunities for academic growth this student may have:

---

---

Describe the student's social interaction with peers and adults:

---

---

### PARENT INVOLVEMENT

Parent's/Guardian's level of cooperation with faculty/administration regarding policies and procedures:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Always Cooperative    | <input type="checkbox"/> Usually Cooperative | <input type="checkbox"/> Not Usually Cooperative |
| <input type="checkbox"/> Minimum Communication | <input type="checkbox"/> Argumentative       | <input type="checkbox"/> Supportive              |

To your knowledge is the parents' perception of their child compatible with the school's understanding of the child? Explain.

---

---

For academic reasons I recommend this student:

- |                                   |                                     |   |
|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Strongly | <input type="checkbox"/> Moderately | <input type="checkbox"/> With Reservation |
|-----------------------------------|-------------------------------------|---|

For character reasons I recommend this student:

- |                                   |                                     |   |
|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Strongly | <input type="checkbox"/> Moderately | <input type="checkbox"/> With Reservation |
|-----------------------------------|-------------------------------------|---|

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

---

Name of Person Completing Form (Please Print) \_\_\_\_\_

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

Title \_\_\_\_\_ Telephone \_\_\_\_\_ Ext \_\_\_\_\_

School Name \_\_\_\_\_

Thank you for your time in assisting us in placing this student.



## AUTHORIZATION TO RELEASE STUDENT SCHOOL RECORDS

*NOTE to Parent/Guardian: This form will not be used until enrollment has been offered and accepted.  
This form is not necessary for students enrolling in IHM School Kindergarten from IHM Preschool.*

The student(s) listed below have enrolled in our school for the 2019/2020 school year.

**STUDENT**

**GRADE (2019/2020)**

|       |       |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Please send all records, transcripts, standardized assessment data, medical records, accommodation forms, ISP's, IEP's, 504's, comments, or any other useful information which would assist us in aiding the student in adjusting to this new situation. Include the student's health and immunization records. Thank you for your prompt cooperation in this matter.

\_\_\_\_\_  
Name of Previous School

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
School Office Phone Number

\_\_\_\_\_  
School Office **FAX Number**

\_\_\_\_\_  
Name of School Principal and/or Counselor

I hereby authorize you to release my child(ren)'s school records to Immaculate Heart of Mary School.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



We are blessed by God. Our grateful response to God's call and gift to us is through our Worship, Service and Support. We live this call every day and seek parents and students who are willing to learn and live by these values in order to enrich their own lives and the lives of others.

IHM Parishioner status is described as: Families who regularly participate in parish religious practice and worship at Immaculate Heart of Mary Parish, or another parish from which they have recently moved, and have done so for a minimum of six months prior to registration including all of the following: **regular Sunday Mass attendance in the parish and use of envelopes (no minimum dollar amount required), support of all sacramental programs, participation in religious formation programs, a yearly stewardship pledge, volunteer time and talent in ministries and organizations associated with the school and/or parish and financial support of the church to the best of the family's ability.** Parishioner status will be reviewed on an annual basis.

Please complete this form listing activities for the parish, including school activities and return it with your registration paperwork.

### WORSHIP

We practice worship by doing the following at IHM Parish: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SERVICE

We practice service by doing the following at IHM Parish: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SUPPORT

We support our parish by sharing our treasure in the following areas:

- Weekly Envelopes     CISE     CMA     Endowment Fund     IHM Gala     Project Education

Other: \_\_\_\_\_

- IHM Parishioner for 1+ years     IHM Parishioner for less than 1 year     Parishioner at another Catholic Parish     Not Catholic

*Please Print:*

Parent Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Names of Children Attending IHM School or Preschool in 2019/2020:  
\_\_\_\_\_

**THIS PAGE RETURNED WITH COMPLETED REGISTRATION**



Would you please take a moment to assist us in planning for the future of our school?  
We appreciate your cooperation!

Parent Name \_\_\_\_\_

Preferred Phone \_\_\_\_\_

List the names and birth dates of any young children in your family who **DO NOT YET ATTEND OUR SCHOOL/PRESCHOOL** (*do not include 2019/2020 Immaculate Heart of Mary School/Preschool incoming students or older students you do not plan to enroll at IHM School*).

*If this does not pertain to your family there is no need to return this form.*

**Birth Date**

**Child's Name**

\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_

**PLEASE RETURN WITH COMPLETED REGISTRATION (IF APPLICABLE)**

**HEALTH OFFICE INFORMATION**  
**Health Services 388-3023**

A current Student Medical Record Form (physical), an Oral Assessment and a complete Immunization Record are required for all students new to Immaculate Heart of Mary School. This includes students who were in the IHM Preschool and have registered for Kindergarten. Parents must present proof their child has had a **complete physical** during the current school calendar year (August 2018-August 2019). **No form over one year old will be accepted.** Children who do not meet the physical requirement will not be admitted to school unless they present proof of a confirmed physician's appointment for the physical to be completed within 15 days of the first day of school. If the completed form is not returned within 7 days of the confirmed examination date, the student will be excluded from school.

**All physical examination forms are due in the Health Office by August 1<sup>st</sup>.**

**SEE CHECK LIST BELOW:**

**STUDENT MEDICAL RECORD (Physical)**

**IMMUNIZATION RECORD**

(Per Sections 3313.671 and 3701.13 of the Ohio Revised Code)-attach copy to Student Medical Record.

**ORAL ASSESSMENT**

Must be completed by the appropriate dental personnel and attached to the Student Medical Record.

**SPINAL DEFORMITY and BASIC METABOLIC INDEX (BMI) SCREENING**

These screenings are not conducted at IHM. Parents should have their children screened by the child's physician.

**VISION/HEARING SCREENING**

Vision/Hearing Screening set forth by the Ohio Department of Health (ODH) Guidelines (section 3313.69 of Ohio Revised Code) is conducted at Immaculate Heart of Mary School as part of the K/1st grade Readiness Assessment. The vision screening includes Observation, Monocular Distance Visual Acuity, Ocular Muscle Balance, Stereopsis and Color Deficit (males only) based on ODH rules. The hearing screening includes Observation and Pure-tone Conduction Audiometry.

The ODH stresses that these screenings, while a valuable public health procedure, are not a substitute for a complete vision/hearing examination by a healthcare professional. Screening is not a diagnostic evaluation and will not detect all vision/hearing problems. **Students new to the school should have the screening completed as part of the physical.**

**EMERGENCY MEDICAL RESPONSE PLAN (EMRP)**

Students with any type of medical condition which may require an emergency medical response must provide the school with an **Emergency Medical Response Plan** which outlines the medical condition, medication and emergency response needed. All plans must be reviewed and signed by the student's physician and school health aide. Examples of medical conditions which require an EMRP are/but not limited to: food allergy, asthma, diabetes, epilepsy, cystic fibrosis, anxiety attacks, heart/arrhythmia condition, celiac disease, etc.

It is the parents' responsibility to notify and provide the EMRP to the appropriate transportation district and after-school functions. It is highly recommended the student wear medical alert jewelry.

**MEDICATION**

Any medication (both prescription and non-prescription) or herb/supplement which may be needed during the school day requires a physician's authorization. This includes the use of painkillers, cough drops, etc. The authorization form must be on file in the Health Office along with the medication/supplement in its' original container. **Students are not allowed to possess medication during the school day unless the medication is a rescue medication (epi-pen, inhaler).** If the student carries his/her own rescue medication, the authorization form and EMRP are still required to be filed in the Health Office. Rescue medication must be accessible at all times and not kept in the student's locker.

**MEDICAL FORMS ON THE WEB SITE**

The following forms are available on the Immaculate Heart of Mary School web site at [www.ihomschool.org](http://www.ihomschool.org) :

Authorization to Administer Prescription and Non-prescription Medication/ Herbal Supplements

Authorization for Student Possession and Use of an Inhaler

Authorization for Student Possession and Use of Epinephrine Auto-injector

Exemption regarding immunizations and/or vision/hearing screening

Emergency Medical Response Plan-Universal

Emergency Medical Response Plan-Asthma

Emergency Medical Response Plan -Severe Allergy (Food, Bee, Other)

Student Medical Record (Physical Form)

Oral Assessment (Part of Medical Record)

(Refer to the Student Handbook located on the school web site for more information.)