



# Thank you for applying to be a part of our St. James School community

**For your student's application to be reviewed we need:** A fully completed paper application with all sections answered, your student's most recent report card and documentation of all income for the household(s) in which the child resides.

## Basic Information

Student Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_ Gender:  M  F

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Date Application is being submitted: \_\_\_\_\_ Grade Applying for:  4  5  6  7  8

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Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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Date of Birth: \_\_\_\_\_ Present Age: \_\_\_\_\_ Religious Affiliation: \_\_\_\_\_ Name of Place of worship: \_\_\_\_\_

### Ethnic Background *Select all that apply*

- African American     Hispanic/Latinx     Asian     Caucasian     Native American  
 Multiple ethnicities     Prefer not to answer     Other

## Home Life

### With whom does your student live? *Select all that apply*

- Lives with both parents, parents are married or live together     Lives with both parents, but parents do not live together  
 Lives with mom only     Lives with dad only     Lives with legal guardian other than parent  
 Lives with an adult, other than parent, who is not the legal guardian     Lives in foster care

|                                     | Guardian 1 | Guardian 2 |
|-------------------------------------|------------|------------|
| Name                                |            |            |
| Relation to Student                 |            |            |
| Address if different from student   |            |            |
| Occupation                          |            |            |
| Employer                            |            |            |
| Cell phone number                   |            |            |
| Email address                       |            |            |
| Highest level of education achieved |            |            |

How long has the student lived in current home? \_\_\_\_\_ Who is the guardian the student lives with? \_\_\_\_\_

If you share custody, how much time does your child spend at each residence? \_\_\_\_\_

What is the primary language spoken in your home?  English  Spanish  Other

Does your student have computer access at home?  Yes  No  Sometimes

Does your students have internet access at home?  Yes  No  Sometimes

Please share the names of additional students (0-17) and adults (17+) living with the student. If your student has multiple addresses please note which children and adults live at each location:

| Child Name | Age (0-17) | Relationship to Student | School Name |
|------------|------------|-------------------------|-------------|
|            |            |                         |             |
|            |            |                         |             |
|            |            |                         |             |
|            |            |                         |             |
|            |            |                         |             |
| Adult Name | Age (18+)  | Relationship to Student | Occupation  |
|            |            |                         |             |
|            |            |                         |             |
|            |            |                         |             |

## School History and Health

List all of the schools your child has attended, beginning with the first school.

| School Name | Grade(s) | Reason for leaving |
|-------------|----------|--------------------|
|             |          |                    |
|             |          |                    |
|             |          |                    |
|             |          |                    |

Has your student even repeated a grade?  Yes  No If yes, please explain

Has your student ever been expelled?  Yes  No How many times? Please explain

Has your student even been suspended?  Yes  No How many times? Please explain

Has your student ever been evaluated for and IEP?  Yes  No If yes, please explain

Does your current currently have an IEP?  Yes  No If yes, what is their classification?

*IEPs must be shared with the school for students to be admitted*

If your student has 504 plan currently, what is their classification?

*504 plan must be shared with the school for students to be admitted*

Has your student even been evaluated for psychological/emotional needs?  Yes  No If yes, please explain

Is your student presently enrolled in special education programming?  Yes  No

Is your student currently attending counseling or therapy?  At school  Outside of school  No

Does your student suffer from allergies?  Yes  No Please list allergies

Does your student require medication or an Epipen?  Yes  No Please list medications

Does your student suffer from any serious illness, disability, physical or emotional limitation, depression or other mental illness?  
 Yes  No Please explain

Does your student have hyperactivity, ADD or ADHD?  Yes  No

Does your student currently take medication?  Yes  No

How many days has your student been absent from school in their past school year?

How many times has your student been tardy in their past school year?

## Statements

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**Student Statement:** *This response needs to be written by the student applicant.* Why do you wish to attend St. James School? What are you looking for in a new school?

**Parent Statement:** Why do you wish for your student to attend St. James School? What are you looking for in a school for your child?

Please describe any **circumstances** that have impacted your **student's performance in school** - this may be illness, family circumstances, learning difficulties, or trauma.

What **activities, hobbies, clubs or sports** does your student currently participate in?

How did you **hear about** St. James School? *Check all that apply*

- |  |   |
|--|---|
| <input type="checkbox"/> Current student/family (Name: _____)      | <input type="checkbox"/> Facebook                                 |
| <input type="checkbox"/> Saw a flyer (Where? _____)                | <input type="checkbox"/> Through a St. James staff member         |
| <input type="checkbox"/> Graduate and/or their family (Name _____) | <input type="checkbox"/> My own research                          |
| <input type="checkbox"/> Walked past the school                    | <input type="checkbox"/> Through the Church of St. James the Less |
| <input type="checkbox"/> Other: _____                              |   |

## Financial Information

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*To be eligible to attend St. James School students must be eligible for Free and Reduced Lunch.*

How many dependents live within the household? \_\_\_\_\_ How much yearly employment income does your family receive? \_\_\_\_\_

Is your work hourly or salaried? \_\_\_\_\_ Does your family receive SNAP?  No  Yes, if yes, how much monthly? \_\_\_\_\_

Does your family receive TANF?  Yes  No - If yes, how much monthly? \_\_\_\_\_

Does your family receive SSI?  Yes  No - If yes, how much monthly? \_\_\_\_\_

Does your family receive unemployment?  Yes  No - If yes, how much monthly? \_\_\_\_\_

Does your family receive workers compensation?  Yes  No - If yes, how much monthly? \_\_\_\_\_

Does your family receive WIC?  Yes  No - If yes, how much monthly? \_\_\_\_\_

Does your family receive Child Support?  Yes  No - If yes, how much monthly? \_\_\_\_\_

Please detail any other financial support received: \_\_\_\_\_

*Please submit documentation of any income you circled **yes** for.*

## Family Commitments

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The families of St. James students worked together with the school team to develop a list of the top 10 habits of successful learners. Please check **Yes** beside each habit if you agree to and accept these expectations.

- 1.) My child will get 9 hours of sleep each night.  Yes
- 2.) My child will arrive at school on time (7:50 AM) and in full uniform daily.  Yes
- 3.) We will call the front desk by 8:00 AM if our child will be late, or absent.  Yes
- 4.) We will check the family communication folder (blue folder) every Monday evening.  Yes
- 5.) We will attend Family Teacher Conferences through the year.  Yes
- 6.) We will participate in the community by volunteering at >3 Family Service Days per year.  Yes
- 7.) We will attend monthly Family Guardian Association meetings.  Yes
- 8.) We will check that our child will complete their homework nightly, and reads at home.  Yes
- 9.) We will participate in the \$30 a month family fee.  Yes
- 10.) We will monitor our child's screen time at home (video games, social media, and internet).  Yes

## Additional Expectations

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*Please initial beside each note indicating you understand and agree to the following:*

- 1.) I understand that to finish my application, my child must attend the mandatory three-week summer camp program in July 2021 at St. James School. The 2021 dates are July 5-23.  Yes
- 2.) I understand that part of my student's acceptance is attending mandatory summer programming each year during July.  Yes
- 3.) I understand that SJS 4<sup>th</sup> graders dismiss at 3:15 Monday - Friday and that 5-8<sup>th</sup> graders dismiss at 3:15, 4:15 or 5:00.  Yes
- 4.) I understand that St. James does not have a special education program.  Yes
- 5.) I understand that my family must be eligible for free and reduced lunch to be admitted to St. James School.  Yes
- 6.) I understand that St. James has a no bullying and no fighting policy.  Yes

I wish to fully cooperate with the rules and policies of St. James School if my child is accepted.

Parent/Guardian Signature \_\_\_\_\_ Date:

Parent/Guardian Signature \_\_\_\_\_ Date:

## St. James School Policy of Non-Discrimination

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St. James School admits students of any gender, race, color, nationality, and religion to all rights, privileges, programs and activities generally accorded to made available at school. St. James School does not discriminate on basis of gender, race, color, nationality or religion in the administration of its educational policies and school administered programs.

## Next Steps

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After submitting this paper application, **the student's most recent report card and documentation of household income are required for the application to be reviewed. The next step after this will be to provide proof of address and 2 letters of recommendation.**

Please do not hesitate to contact Steph Padilla, with any questions or concerns.  
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