

## **Application For Admissions**

**Steps** (All steps must be completed before a student will admitted to NMS.)

- 1. Complete Application Packet
- 2. 2018 Tax Return (1040 or 1040A)
- 3. Teacher Recommendation
- 4. Recent report card
- 5. Complete an interview and test

**Applications Due By April 15**Date Received:

## STUDENT INFORMATION

Student's Name		Age	Gr	Grade applying for Geno			M/F
Street Address	5						
	INFORMATION						
	Mother or Guardian		Fat	her or Gu	uardian		
Name							
Occupation							
Employer							
Cell Phone							
Work Phone							
Email							
Address (if different than a							
Siblings and de	ependents living in the home (not	t parents)					
Name		Age Gr	ade	School _			

Name	Age	Grade	School	
Name	Age	Grade	School	
Name	Age	Grade	School	
List all schools attended from 1st grade u	ntil present. I	ndicate the	grade(s) att	ended at each school.
School				Grade(s)
School				
School				
School	Grade(s)			
Is there any illness, symptom or disability school activities? Yes No If yes, please explain.	which may a	ffect the st	udent's stud	es or participation in
Does the student currently receive any IE attends? Yes No If yes, please explain the services provided	•	cial educati	on services a	it the school he or she nov
Please indicate below if your child receive	es any of the f	following so	chool related	support services.
Counseling (in school)			1 Remedial	Reading
Counseling (outside of school)Speech/language therapy			ource Room	
Speccificanguage therapyESL (English as a Second Language)Title 1 Remedial Math		Other		
If you have selected yes for any of the abo	ove, please id	entify the s	supportive su	upport provider(s).
STUDENT QUESTIONNAIF (All answers must be written by the student) Why do you wish to attend NativityMigue		cranton?		

List any activities, sports, interests, and hobbies in which you currently participate.					
PARENT QUESTIONNAIRE					
As parents, you best know your student's academic strengths and weaknesses. By answering the questions below openly and honestly, you will help us to ensure that we provide your child with the best possible education.					
Why do you want your child to attend NativityMiguel School of Scranton?					
Please describe any specific circumstances that have affected your student's performance in school, such as an illness or physical disability, learning difficulties, or family circumstances. Please include documentation concerning any special testing your child may have had.					
Financial Statement					
NativityMiguel School of Scranton serves students who have financial need. All students who attend the school receive a full scholarship, provided by the generous support of our donors. Therefore, family income is an important factor considered during the admissions process. All financial information is kept confidential and viewed only by the admissions committee.					
Number of dependents in family Annual family income (from all sources)					
Amount of Child Support or other financial support received					
Does the student qualify for the National School Lunch Program (free or reduced school lunch)					

SPECIAL FINANCIAL CIRCUMSTANCES

ccasionally, families anticipate special financial circumstances. If so, please provide a brief description any significant changes in income, expenses or financial condition expected during this coming school ear, or other information you would like considered when eligibility is being determined.					
How did you hear about NativityMiguel School of Scranto	n? Please be specific.				
PARENT/GUARDIAN STATEMENT (	OF INTENT				
It is my understanding that NativityMiguel School of Scrar a mandatory extended day program and a summer progra and academic and attendance requirements. I understand full participation of parents/guardians, is necessary in ord NativityMiguel School of Scranton.	am, a required code of conduct, dress code, d that full participation of students, as well as				
I understand that parent(s)/guardian(s) are required to paschool through volunteer activities.	ay a minimal yearly fee and to support the				
I understand that the school will readmit each year only t progress, attendance, and personal behavior is satisfactor demonstrated commitment to the goals of the school.					
I affirm that the information on this application is true. Or application being void and/or the child losing his or her so					
Parent/Guardian Signature	Date				
Parent/Guardian Signature	Date				
POLICY OF NON-DISCRIMINATION					
I OLICE OF HOREDISCHMINIATION					

NativityMiguel School of Scranton admits students of any race, religion, color, nationality, and ethnic origin to all rights, privileges, programs and activities generally accorded or made available at the school. NativityMiguel School of Scranton does not discriminate on the basis of race, religion, color, nationality or ethnic origin in the administration of its educational policies and scholarship, athletic, or other school-administered program.

## **NEXT STEPS**

Thank you for applying to NatitvityMiguel School of Scranton.

1 Knox Road,

Applications submitted prior to April 15 will be reviewed by the admissions committee, and acceptance decisions will be mailed by May

1. Applications received after April 15 will be considered on a rolling admissions basis. If additional information is needed, you will be

Page 4