

REGISTRATION INSTRUCTIONS 2023-2024

Welcome to St. Peter the Apostle Catholic School!

Whether you are a new or returning family, please know that we are grateful that you have chosen us to be partners with you in educating your children.

Please read and/or sign the following documents:

- Tuition Rates/Fees
- Tuition & Policy Agreement
- Financial Commitment - You Must SELECT A PAYMENT OPTION or the 10 Month plan will be selected for you
- Family/Student Registration Information—(please complete both sides)
- FACTS Form-Only new families need to register with FACTS and submit a \$50.00 Enrollment Fee. Returning families are automatically re-enrolled with FACTS.
- Include a Registration check for (\$250 per child/ or a minimum \$100 per child to hold your spot). The balance will be automatically added to your FACTS agreement in June.

Changes for the 2023-2024 School Year

- Due to limited space in each grade, returning families need to hold their spot for next year by **March 10th**
- Registration fee is \$350 after **APRIL 28th** (if space is still available)
- Open Registration begins on **March 13th**
- Tuition increase for K-8 and Preschool
- Campus hours are from 7:30 to 5:00 and we will offer after care from dismissal to 5:00 at \$5 per hour per child.

Scholarship Eligibility

- You must first submit a completed School Registration packet and pay the Registration Fee.
 - Scholarship availability is limited. Please submit letter to review scholarship eligibility no later than **March 17th**.
- **All families need to pay an increase in their tuition rate this year to assist with operational costs.**

For NEW FAMILIES: Please include the following documents:

- Birth Certificate
- Immunization Record
- Report Card
- Baptismal Certificate (if applicable)

Please tell a friend, relative, or neighbor about St. Peter the Apostle Catholic School! You will receive a \$250 Scrip Referral Award once they register and stay for at least 60 days.

2023-2024 TUITION RATES/FEEES

K-8 Student Annual Tuition: \$6250

| K-8 Students | 10 Monthly Payments | 12 Monthly Payments July-June |
|--------------------------------------|---------------------|----------------------------------|
| 1st Child | \$625 | \$525 |
| 2 nd Child (20% discount) | \$500 | \$420 |
| 3 rd Child (50% discount) | \$315 | \$265 |
| 4 th Child (75% discount) | \$160 | \$135 |

| | PRESCHOOL 2 Year olds | | | PRESCHOOL 3 Year olds | | | PRE-K 4 year olds | |
|-------------------------|-----------------------|----------------|----------------|-----------------------|----------------|----------------|----------------------|----------------|
| | 5 days | 4 days | 3 days | 5 days | 4 days | 3 days | 5 days | 4 days |
| Full Day: 7:30-5:00 | \$925 | \$900 | \$875 | \$750 | \$725 | \$700 | \$725 | \$700 |
| Half Day: 8:00-12:30 | \$825 | \$800 | \$775 | \$650 | \$625 | \$600 | \$625 | \$600 |
| Please Circle Days | M, T, W, Th, F | M, T, W, Th, F | M, T, W, Th, F | M, T, W, Th, F | M, T, W, Th, F | M, T, W, Th, F | M, T, W, Th, F | M, T, W, Th, F |

Registration Fee (per student) (Non-Refundable) - Must be paid in full by July 1st

| | |
|--|-------|
| Registration (pay \$100.00 per child to hold spot) | \$250 |
| Registration for returning families after April 28 th | \$350 |

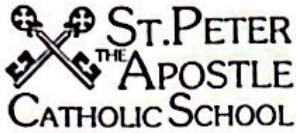
The Following Fees Must Be Paid In Full By Due Date Or Will Be Added to your FACTS

| | |
|--|-------|
| Technology Fee- DUE: <u>Sept 1st</u> (ALL STUDENTS-Non-Refundable) | \$75 |
| Diocesan Service Fee- DUE <u>Sept 1st</u> (ALL STUDENTS-Non-Refundable) | \$25 |
| Pre-K Book Fee - DUE: <u>Sept 1st</u> (Non-Refundable) | \$45 |
| K-8 Materials/Yearbook Fee DUE: <u>Sept 1st</u> (ALL STUDENTS-Non-Refundable) | \$45 |
| Sacrament Fee-DUE: <u>Nov 1st</u> (First Communion/First Reconciliation) | \$100 |
| Grade 6 Camp Fee- DUE: <u>February 1st</u> | \$400 |
| Grade 8 Graduation - DUE : <u>March 1st</u> | \$400 |

ALL Tuition Payments must be processed through FACTS

| | |
|---|-----------------|
| 1 Payment: due by August 5 | FACTS FEE: \$5 |
| 2 Payments: due by August 5 / January 5 | FACTS FEE: \$15 |
| 10 or 12 Payments: all payments must be complete by June 20 | FACTS FEE: \$50 |

- > Tuition income alone does not cover all operating expenses. We rely on YOUR participation in all the fundraising events/activities. There are usually 4 required fundraisers throughout the year-- all families--Preschool through Grade 8--are required to participate.
- > All families are expected to purchase Scrip every month (\$40.00 minimum or \$450.00 buy-out)



Family Name _____

2023 – 2024 TUITION & POLICY AGREEMENT

Philosophy

St. Peter the Apostle Catholic School is an integral ministry of our Parish. Catholic values are interwoven into a comprehensive curriculum relevant to the Gospel. Recognizing and encouraging parents as the primary educators and teachers as facilitators, students are empowered to take responsibility for their learning and challenged to reach their individual potential. St. Peter the Apostle Catholic School teaches *Traditional Values, Today's Technology, and Tomorrow's Leaders!*

Mission Statement

St Peter the Apostle Catholic School is dedicated to academic excellence and devoted to nurturing courageous leaders rooted in prayer, community, and service.

Parent Expectations _____ initial

- It is essential to our mission, that families attend Saturday/Sunday Mass on a weekly basis.
- Role modeling to your children the act of giving your time, talent, and treasure
- Regular, consistent giving to the parish/ other Catholic charities.

Parent Participation _____ initial

- Fundraising in our Catholic school is essential because the tuition dollars alone are not sufficient to cover all expenses. There are usually 4 required fundraisers throughout the year where all families—Preschool through Grade 8— are required to participate. If you do not attend the event, or help with its success, a fundraising fee equivalent will be billed to you.
- All families are expected to purchase Scrip every month (\$40.00 minimum purchase or \$450.00 Buy-Out)

Non-Payment of Tuition _____ initial

Chronic delinquencies may result in withholding your child's report card/diploma; your account forwarded to a collections agency; and/or your child not being allowed in the classroom until payment arrangements are made with the principal.

Student Withdrawal

If you need to withdraw your student(s), you must provide a 30-day notice in writing to the office. Tuition is not prorated; therefore, you are held responsible for the full month's tuition rate when you withdraw your student(s).

Refund Policy

Registration, Technology, and Diocesan fees are non-refundable. Tuition is refundable, based on the number of unused months of prepaid tuition. Attendance for one day in the month constitutes payment due for the month.

Scholarships

Limited assistance based solely on financial need is available to new and currently enrolled students. Please write me a letter stating the amount that you can pay for tuition no later than March 17th for review. Please remember you need to pay increased amount due to higher operating costs. This does not guarantee you will get financial assistance. You will receive notification of the amount available by April 21st.

Special Needs

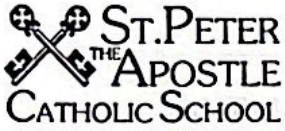
St. Peter the Apostle Catholic School recognizes that we may not be able to accommodate students who demonstrate severe grade level deficiencies or behavioral problems. We will make every effort to assist with referrals for alternative school placement, if necessary.

Acceptance Statement

I agree to comply with and actively support the Philosophy, Mission, goals, programs, policies and procedures of St. Peter the Apostle Catholic School as outlined in the Parent Handbook, which is available on the school website www.spacschool.com. I agree that the Principal has the right to dismiss a student in the best interest of the student and school.

Parent/Legal Guardian Signature Date

Parent/Legal Guardian Signature Date



2023-2024 FINANCIAL COMMITMENT FORM

Family Name _____

| 2023-2024 TUITION RATES | | | | | | | | |
|------------------------------------|--------------------------|--------|--------|-------------------------------|--------|--------|----------------------|--------|
| K-8 Student Annual Tuition: \$6250 | | | | | | | | |
| K-8 Students | 10 Monthly Payments | | | 12 Monthly Payments July-June | | | | |
| 1st Child | \$625 | | | \$525 | | | | |
| 2nd Child (20%) | \$500 | | | \$420 | | | | |
| 3rd Child (50%) | \$315 | | | \$210 | | | | |
| 4th Child (75%) | \$160 | | | \$135 | | | | |
| | PRESCHOOL 2 year olds | | | PRESCHOOL 3 year olds | | | PRE-K 4 year olds | |
| | 5 days | 4 days | 3 days | 5 days | 4 days | 3 days | 5 days | 4 days |
| Full Day 7:30-5:00 | \$925 | \$900 | \$875 | \$750 | \$725 | \$700 | \$725 | \$700 |
| Half Day 8:00-12:30 | \$825 | \$800 | \$775 | \$650 | \$625 | \$600 | \$625 | \$600 |

| Check ONE | # Payments | Due by | FACTS Fee |
|-----------|---------------|--|-----------------|
| | 1 Annual | August 5 | \$5 Annual Fee |
| | 2 Semi Annual | Aug. 5/Feb 5 | \$15 Annual Fee |
| | 10 Monthly | July- April Aug- May or Sept -June | \$50.00 |
| | 12 Monthly | July - June | \$50.00 |

| SUMMARY | |
|--|-----------------------------|
| All Tuition must be paid through FACTS | |
| Total Annual Tuition \$ | _____ |
| Total Registration Fee \$ | _____ |
| Total Classroom Fees \$ | _____ |
| _____ All fees will be added to FACTS | |
| _____ Technology Fee-\$75 (due Sept 1 st) | |
| _____ Pre-K Book Fee (due Sept 1 st) | |
| _____ K-8 Materials/Yearbook Fee (due Sept 1 st) | |
| _____ Sacrament Fee-\$100 (due Nov 1 st) | |
| _____ Diocesan Services Fee- \$25 (due Sept. 1 st) | |
| _____ Camp Fee-\$400 (due Feb 1 st) | |
| _____ Grad Fee-\$400 (due March 1 st) | |
| Total Monthly FACTS Amount | \$ _____ for _____ Payments |

| REGISTRATION/CLASSROOM FEES -- (per student) | |
|--|-------|
| Fees must be paid in full by Due Date or will be added to your FACTS agreement | |
| Registration (Non-Refundable) -- Due July 1st | \$250 |
| Registration after April 28th for Returning Families | \$350 |
| Technology Fee- ALL STUDENTS-Due September 1st | \$75 |
| Pre-K Book Fee -- Due Sept 1st | \$45 |
| K-8 Materials/Yearbook Fee -- Due Sept 1st | \$45 |
| Sacrament Fee - 1 st Communion/ Reconciliation-Due Nov 1st | \$100 |
| Diocesan Services Fee- ALL STUDENTS-Due September 1st | \$25 |
| 6 th Grade Camp Fee-Due February 1 st | \$400 |
| 8 th Grade Graduation- Due March 1 st | \$400 |

*\$100.00 non-refundable deposit to hold child's spot.

Initials _____
Expectations _____

- It is essential to our mission that families attend Saturday/Sunday Mass on a weekly basis.
- Role model to your children the act of giving your time, talent, and treasure.
- Regular, consistent giving to the parish/ other Catholic charities.

Participation _____

- Fundraising in our Catholic school is essential. Tuition is not sufficient to cover all expenses.
- There are usually 4 required fundraisers throughout the year -- all families--Preschool through Grade 8-- are required to participate.
- All families are expected to purchase Scrip every month (\$40.00 minimum) or \$450 buy-out.

| FINANCIAL RESPONSIBILITY |
|---|
| Printed Name of person responsible for tuition payments |
| Signature of person responsible for tuition payments |
| Social Security Number of person responsible for tuition payments |

| PARENT INFORMATION | FATHER'S INFORMATION | | MOTHER'S INFORMATION | |
|--|--|--|--|--|
| First Name, Last Name | | | | |
| Home Address | | | | |
| City, Zip Code | | | | |
| Home Phone | | | | |
| Work Phone | | | | |
| Cell Phone | | | | |
| Occupation | | | | |
| Employer | | | | |
| Religion | | | | |
| Did you graduate high school? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Parish Name where you are registered as a parishioner | | Envelope # | | Envelope # |
| Marital Status | <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other | | <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other | |
| Email Address Please enter the <u>Main</u> Family email account | | | | |
| What phone numbers do you want us to use for our <u>One Call Messaging System</u> ? You may enter up to 4 numbers. | Number 1 | Number 2 | Number 3 | Number 4 |
| | | | | |
| Check the box if this phone can receive text messages | Text Message? | Text Message? | Text Message? | Text Message? |
| | YES <input type="checkbox"/> NO <input type="checkbox"/> | YES <input type="checkbox"/> NO <input type="checkbox"/> | YES <input type="checkbox"/> NO <input type="checkbox"/> | YES <input type="checkbox"/> NO <input type="checkbox"/> |

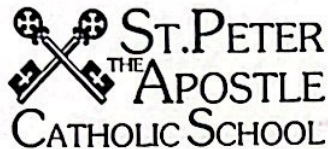
| | |
|---|--|
| IN THE EVENT OF ILLNESS or EMERGENCY <input type="checkbox"/> CALL MOTHER FIRST <input type="checkbox"/> CALL FATHER FIRST IF WE CANNOT REACH YOU, PLEASE LIST 2 OTHER EMERGENCY CONTACTS. | |
| Name | |
| Relationship | |
| Home Phone | |
| Cell Phone | |

I authorize St. Peter the Apostle Catholic School to provide medical services/treatment for my children in the event of an illness or emergency.

PARENT CONSENT: _____

| |
|---|
| PHOTO RELEASE AUTHORIZATION St. Peter the Apostle Catholic School is authorized to photograph my children for the following: <input type="checkbox"/> Yearbook-- to include the annual class photo and other candid photographs for the yearbook ONLY <input type="checkbox"/> The school website <input type="checkbox"/> The Village News and/or Southern Cross newspapers <input type="checkbox"/> Social Media (St. Peter the Apostle Facebook, etc) <input type="checkbox"/> NONE |
|---|

PARENT SIGNATURE _____ DATE _____



Family Name: _____

FAMILY/STUDENT REGISTRATION INFORMATION

The following information is required for statistical reporting or Federal Funding allocation purposes. All information is confidential.

| STUDENT INFORMATION | 1 st child | 2 nd child | 3 rd child | 4 th child |
|--|---|---|---|---|
| Student First Name | | | | |
| Student Last Name | | | | |
| Grade for 2023-2024 | | | | |
| Date of Birth | | | | |
| Student Religion | | | | |
| Has he/she been Baptized Catholic? | | | | |
| Has he/she made 1 st Reconciliation? | | | | |
| Has he/she received 1 st Holy Communion? | | | | |
| Health Concerns (asthma, allergies, ADHD, etc.) | | | | |
| Medications-Does he/she need to take medications at home/at school? | | | | |
| Student Ethnic Origin (Choose ONE) | <input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown | <input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown | <input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown | <input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Unknown |
| CATEGORICAL FUNDING- The following information is for Federal Categorical Funding Allocation purposes only. | | | | |
| What was the child's first language? | | | | |
| What language does the child use the most? | | | | |
| What language do the parents use the most with the child? | | | | |
| What language is used most often in the home by the adults? | | | | |
| Family Size | Annual Income | | | |
| One* | \$16,391 | *This may be a foster child, emancipated youth, or special education child over the age of 18. For each additional family member, add \$5698. If you are paid on a weekly/monthly basis, please multiply that amount by the number of weeks/months you work each year. | | |
| Two | \$22,089 | | | |
| Three | \$27,787 | | | |
| Four | \$33,485 | | | |
| Five | \$39,183 | | | |
| Six | \$44,881 | Circle your answer to these 3 questions. | | |
| Seven | \$50,579 | Is your family income less than the amount listed? | YES | NO |
| Eight | \$56,277 | Are you eligible for food stamps? | YES | NO |
| | | Are you receiving TANF Cash assistance/AFDC or public assistance? | YES | NO |