

**GOOD SHEPHERD NATIVITY MISSION SCHOOL**

**Application for Admissions**

(2018 - 2019)

[Please print all information clearly]

**I. Student Information**

1. Student's Name: \_\_\_\_\_ Gender: [ ] Male [ ] Female Age \_\_\_\_\_  
(Last) (First) (MI)

2. Street Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
Street City Zip Apt.

3. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

4. Social Security #: \_\_\_\_\_

5. Grade Applying For: \_\_\_\_\_

6. School Attending Now: \_\_\_\_\_ Grade \_\_\_\_\_

**II. Family Information**

1. **Father's Name:** \_\_\_\_\_ **Street Address:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Work #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

2. **Mother's Name:** \_\_\_\_\_ **Street Address:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Work #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

3. **Guardian's Name:** \_\_\_\_\_ **Street Address:** \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Work #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

4. \_\_\_ Parents Married                      \_\_\_ Father Remarried                      \_\_\_ Father Deceased

\_\_\_ Parents Together/Not Married      \_\_\_ Mother Remarried                      \_\_\_ Mother Deceased

\_\_\_ Parents Divorced/Separated      \_\_\_ Single Parent (Mother/Father)

Is there a Custody Order of any Court? [ ] Yes [ ] No Which Court? \_\_\_\_\_

**[Please Attach a Copy of Legal Papers]**

5. Student lives with: \_\_\_\_\_ Relation: \_\_\_\_\_

6. Maternal Grandparent's Name(s): \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

7. Paternal Grandparent's Name(s): \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

**8. Brothers and sisters:**

Name	Age	Grade	School

9. Religion: \_\_\_\_\_ Church Attend: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church of Baptism: \_\_\_\_\_

Date of First Communion: \_\_\_\_\_ Church of 1<sup>st</sup> Communion: \_\_\_\_\_

**10. Please note: You must submit whichever of the following apply to you along with your application, or your application will not be accepted.**

- a) A Seat Acceptance Letter for the Scholarship Letter
- b) Birth Certificate
- c) Shot Records
- d) Proof of Income [W-2, SNAP]
- e) Proof of Residency [a bill, Lease, or Letter from a Govt Official]
- f) Student's Social Security Card
- g) **Final Report Card and iLEAP, or LEAP Test Scores**

11. Has anyone in your family attended Good Shepherd Nativity Mission School? [ ] Yes [ ] No

If yes, who? \_\_\_\_\_

What is the relation? \_\_\_\_\_

When? \_\_\_\_\_

**III. Academic Information:**

**1. Schools Attended:**

SCHOOLS	GRADES	DATES ATTENDED

2. Has the student ever been evaluated as needing a Special Education Program?

Yes  No [IF SO, BY WHOM?] \_\_\_\_\_

If yes, parent must provide the following documentation stating the services received, such as:

- a) An IEP from a public school
- b) A psychological, academic, or behavior assessment/evaluation

3. Is the student entitled to any special school-related supportive services? Please check all that apply:

Counseling                       Remedial Reading – Title One                       Remedial Reading – Title One  
 Adaptive P. E.                       Speech and Language Therapy                       Occupational Therapy  
 Resource Room                      [ ] Yes [ ] No - Is the student receiving Counseling/Therapy in a non-school setting?

4. Is there any illness which may interfere with the child’s studies or participation in extracurricular or physical activities?  Yes  No

If yes, please indicate what the condition is (asthma, etc.), explain, and provide documentation. \_\_\_\_\_  
\_\_\_\_\_

5. Is there any type of disability that may interfere with the child’s studies or participation in extracurricular or physical activities?  Yes  No

If yes, please indicate what the condition is (dyslexia, ADD, ADHD, etc.), explain, and provide documentation. \_\_\_\_\_  
\_\_\_\_\_

a) Does the student wear glasses?  Yes  No      b) Does the student wear a hearing device?  Yes  No

**Admission of Children with Special Needs [See Student Handbook]**

The Good Shepherd School will make every effort to assist students who have special needs within the reasonable resources of the school. However, the school **does not** have a Special Education Program. The only service available is speech therapy and some counseling provided through the services of the Orleans Parish School Board, Catapult, and Fleur De Lis. Should the student require adjustments that the school is unable to provide, the school reserves the right to determine that the student’s placement in the school is not appropriate.

6. Is the student involved in any program outside of school?  Yes  No

Boys’ Club                       Boy/Girl Scouts                       Religious Instruction Classes  
 Art, Drama, Music                       Sports                       Karate                       Gymnastics  
 Other - Please explain: \_\_\_\_\_

**IV. Parent's Statement of Intent:**

Why do you wish for your child to attend Good Shepherd Nativity Mission School?

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What would you like your child to learn this school year?

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Do you have any academic concerns regarding your child?

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**Parent/Guardian Signature:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Date:** \_\_\_\_\_