



For Office Use Only		
Date received	_____	
Fee Paid	_____	
Check #	Cash	_____
Credit Card	_____	
A	WL	NA

St. Lawrence School

231 Main Street, West Haven, Connecticut, 06516

Celebrating 99 Years of Educational Excellence

Web site: www.stlaweduk12.net/ Phone: 203-933-2518 Fax: 203 933 2058

General Information: A non-refundable application fee must accompany the application. The amount for Pre-K is \$35.00. Checks should be made payable to Saint Lawrence School. **A copy of the student's Birth Certificate, Social Security Number, Baptismal (if it applies) must accompany this application.** In order for the application to be processed in a timely manner all necessary paperwork must be filled out completely. (Please print clearly.)

Pupil's Name _____ / _____ / _____ Entering **Pre-K:** M ___ F ___
(First) (Middle) (Last)

Address _____ / _____ / _____ / _____
(Street) (City) (State) (Zip)

Date of Birth _____ Place of Birth _____ / _____
(City) (State)

Is Student a U.S. Citizen? Yes _____ No _____ Language spoken in the home _____

Child lives with: Both Parents _____ Mother _____ Father _____ Other _____
(Relationship)

Child's Social Security # _____ Family e-mail address _____

MOTHER'S Information

FATHER'S Information

Name _____
(first) (maiden) (last)

Name _____
(first) (last)

Address _____

Address _____

Home phone # _____

Home phone # _____

Place of work _____

Place of work _____

Work phone # _____

Work phone # _____

Cell phone # _____

Cell phone # _____

Religion _____

Religion _____

e-mail _____

e-mail _____

Saint Lawrence Graduate Yes/Year _____ No _____

Saint Lawrence Graduate Yes/Year _____ No _____

Other children in the family:

Name	Age	Grade	School attending

Relatives who have attended or are attending this school:

Name	List years attended

Religious Information:

Child's Religion _____ If Catholic please list parish(es) or church your family is registered with including the envelope number: Parish _____ Envelope Number # _____

If not Catholic, please note denomination: _____

Sacraments

Baptismal Date	Name of Church	Town, State

***These questions must be answered carefully and completely. Failure to do so will result in an incomplete application.**

1. Why do you wish your child to attend Saint Lawrence School? _____

2. Does your child have any physical handicap or problem that might affect his/her schooling? If yes, please explain.

3. Is there any additional information that would be helpful to the principal, teachers, school nurse etc... in meeting with the academic, social, emotional or physical needs of your child? _____

4. Per policy of the Archdiocese of Hartford, acceptance of any families is contingent upon their being current in their financial obligations to other Catholic Schools. Principals will call each other to verify that all accounts are current.

5. **Please let us know how you heard about St. Lawrence: Please check all that apply:**
 Open House Newspaper Web Site Alumni Current Students
 CCD Program Billboard Walk-in Advertisement Outdoor Sign

Transportation Information:

Bus Address: _____ A.M. _____ P.M. _____ No Bus Needed _____

After-School Program needed _____ Application request _____

Pre-Kindergarten Choices

Children must reach their 3rd or 4th birthday no later than December 31st of the current year.

_____ 3 year old _____ 4 year old

(Choose a time selection below)

Alternate Options M-T-W-TH-F (circle days needed)

_____ M-F 7:50 a.m.-2:20 p.m.

_____ T-Th 7:50 a.m. -2:20 p.m.

_____ M-F 7: 50 a.m.- 11: 00 a.m.

_____ T-TH 7:50 a.m.– 11:00 a.m.

_____ M-F 11:15 a.m. - 2:20 p.m.

_____ T-TH 11:15 a.m. – 2:20 p.m.

_____ M-W-F 7:50 a.m.– 2:20 p.m.

_____ M-W-F 7:50 a.m.– 11:00 a.m.

_____ M-W-F 11:15 a.m. – 2:20 p.m.

_____ Customized days/hours

I hereby give Saint Lawrence School the right to contact any previously attended school in regards to the recent enrollment of my child. I hereby authorize said school to supply any and all information requested. I release all persons, companies and corporations supplying and releasing such information to Saint Lawrence School, the Archdiocese of Hartford, and anyone acting on its/their behalf from and against any and all liability which might result from furnishing or receiving such information. I hereby certify that the information submitted in the application process, including this application is true. I understand that it is determined that any information I have provided is false, the admission of my child may be revoked, or if my child is already in attendance, he or she may be subject to immediate expulsion.

Parent or Guardian Signature: _____ Date _____

Parent or Guardian Signature _____ Date _____

Saint Lawrence School is a Catholic School that accepts student from different religious, racial, and ethnic backgrounds.

