

KINDERGARTEN Registration Form

Sacred Heart Catholic School

22513 Garrison, Dearborn MI 48124

Registration Date: _____

(313) 561-9192

Student's Name _____ M or F
(Last) (First) (Middle)

Address _____ Phone: _____

City _____ State _____ Zip _____

Place/City of Birth _____ Certified Birth Date _____

A copy of the birth certificate must be given to the school office.

Country of Birth _____ Religion _____

Baptism Date _____ Church _____

If Catholic, a copy of baptism certificate must be given to the school office.

Who has legal custody of student: _____ Both Parents _____ Mother _____ Father _____ Other _____
(please specify)

If divorced, please provide a copy of the most current custody agreement, if different than equal custody.

Ethnicity: _____ Primary language by spoken by child: _____

Does your child need any special accommodations to meet their needs? YES NO (please circle one)

If so what are the accommodations? _____

Primary language spoken in the home: _____ Email Address: _____
(one that is regularly checked; school communication is by email)

Father's Name _____
(Last) (First) (Initial)

Marital Status _____ Country of Birth _____ Religion _____

Occupation _____ Work Phone _____ Cell Phone _____

Mother's Name _____
(Last) (First) (Initial) (Maiden Name)

Marital Status _____ Country of Birth _____ Religion _____

Occupation _____ Work Phone _____ Cell Phone _____

Indicate Parish at which parents are registered: _____

School student last attended _____

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

Will student be riding the school bus (must live in Dearborn @ 1 1/2 miles from school)? YES NO

How did you hear about Sacred Heart? _____

Kindergarten parents please see other side for Kindergarten Screening time preferences and additional information needed. Thank You.

Please list all siblings (ages 21 and under) not enrolled at Sacred Heart Catholic School

- 1. _____ Birthdate: _____
- 2. _____ Birthdate: _____
- 3. _____ Birthdate: _____
- 4. _____ Birthdate: _____

Dear Parents of a Kindergartner:

Kindergarten screening for the class of 2018 - 2019 will be on Thursday, May 17th and Friday, May 18th. Testing is during the school day and takes about 20 minutes. You will be in the room with your child during the testing. *In order to give me an idea of a time you prefer, please number your preferences from in the time frames listed below.* I will try to accommodate your preference as much as possible.

Children enrolling in kindergarten are required to submit a birth certificate. On ***SCREENING DAY***, please bring your child’s original birth certificate and baptismal certificate (if Catholic) to the school office and a copy will be made for your child’s file.

I thank you in advance for your cooperation in this matter.

Sincerely,
 Anne M. Pennisi
 School Secretary schoolsecretary@shparish.org

Please choose in order 1 to 4 your choice.

- | | |
|--|---|
| _____ Thursday, May 17 A.M.
(between 8:30 – 11:30) | _____ Thursday, May 17 P.M.
(between 1:00 – 3:30) |
| _____ Friday, May 18 A.M.
(between 8:30 – 11:30) | _____ Friday, May 18 P.M.
(between 1:00 – 3:30) |

(for office use only)

- | | | |
|--|--|--|
| _____ Perm Rec
_____ Fam Enroll
_____ Power School

_____ Fam Dir
_____ Locker
_____ Report Card Cover
_____ Enrollment Tally
_____ Birthday List (2)
_____ Constant Contact List
_____ Powerschool Letter

ID# _____
_____ Berkley Schools | _____ File
_____ SHS Fam
_____ DPS Kindergarten Round-
up
_____ Readiness Testing
_____ PPP List
_____ MSDS
_____ MICR
_____ Bus
_____ Hot Lunch Tally
_____ Student Image
_____ Sign-up Genius list
2030 YOG
_____ Baptismal Certificate | _____ Photo File
_____ on Class List (Roster)
_____ Attendance Log

_____ Email List
_____ Notepad
_____ Inventory List
_____ Concussion Form given
_____ Kaiser School Photo List
_____ Summer Packet
_____ Concussion Form received
_____ Welcome Packet
_____ ICHAT/PGC |
|--|--|--|