



St. Joseph School

FAITH FAMILY EXCELLENCE

2018-19 ENROLLMENT PROCESS

March 23, 2018	New Student Testing*
April 9th	\$75 Family Registration Fee due**
April 27th	First payment of Annual Fees due
May 25th	Second payment of Annual Fees due
June 15	Final payment of Annual Fees due
June	New Parent meeting TBA
August	Registration Check In - TBA

**Students entering Transitional Kindergarten must be 4 years old on or before September 1. Kindergarten must be 5 years old on or before September 1.*

*** Families will select payment in full or payment plan after paying Family Registration Fee of \$75.*

Dear Families,

Thank you for your interest and commitment to Catholic Education. Below are the steps to begin the process of enrolling in St. Joseph School.

New Families

- Student Questionnaire (completed on day of testing)
- Upon receipt of acceptance letter, phone call or email please submit \$75 Family Registration Fee
- SMART Tuition enrollment
- Select payment plan and sign Financial Contract
- Attend New Parent Meeting in June
- Purchase uniforms on selected dates

Returning Families

- Submit \$75 Family Registration Fee due on or before April 9th, 2018. Select payment plan and sign Financial Contract.
- Submit payments according to scheduled dates above.
- Full Registration packet will be sent home on last day of school w/Report Card. Attend **mandatory** Registration Check-In Date in August (TBA) ALL forms must be complete to begin first day of school.



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All forms are due, verified and processed during “Registration Check In” date before school year begins.
(New families will have the option to complete all forms at the “New Parent Meeting” in June)

NEW FAMILIES

- ___ Admissions Application
- ___ Image Release Form
- ___ Birth Certificate
- ___ Baptismal Certificate
- ___ First Communion Certificate
- ___ Current report card
- ___ Immunization Records
(mandatory)
- ___ Physical Examination
- ___ Annual Parish Contribution
- ___ Volunteer Service Form
- ___ Virtus “Teaching Touching Safety”
Permission Slip
- ___ Title I Income Eligibility Survey
- ___ Family Emergency Card
- ___ Parent Handbook Acknowledgment

RETURNING FAMILIES

- ___ Admissions Application
- ___ Image Release Form
- ___ Current Immunization Records
(Mandatory for TK & 7th)
- ___ Annual Parish Contribution
- ___ Volunteer Service Form
- ___ Virtus “Teaching Touching Safety”
Permission Slip (One per student)
- ___ Title I Income Eligibility Survey
- ___ Family Emergency Card
- ___ Parent Handbook
Acknowledgment

2018-19 TUITION

15650 East Temple, La Puente, CA 91744-3924 ~ www.St-JosephSchool-LP.org ~ (626) 336-2821



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Kinder - 8th grade			Transitional Kinder		
	Monthly Tuition	Parish Discount		Monthly Tuition	Parish Discount
1 child	\$362.00	\$325.45	1 child	\$335.00	\$302.00
2 child	\$603.00	\$557.55			
3+ child	\$745.00	\$690.45	Sibling discount		\$302.00

Tuition payment to SMART TUITION from July to May. Due on the 20th or 30th of the month. \$15 late fee and Bank Service Fees will be applied 4 days after due date.

If a student withdraws, tuition for the withdraw month will **NOT BE REFUNDED**. Other monies owed will be refunded in monthly payments, as agreed upon by both parties in writing, until paid in full.

Parish Discount requires letter from St. Joseph Church La Puente reflecting annual giving of \$250.

FEES AND FUNDRAISERS

Fees		Fundraisers	
Family Registration Fee <i>(non-refundable)</i>	\$75	Auction Dinner Tickets	\$120.00 (family)
Annual Fees	\$260 per child	School/Parish Bake Sales	\$50.00 (family)
TK/Kinder Fee	\$100 per child	Candy Drive	\$180 per child
Kinder Supply Fee	\$75 per child	3 boxes per child	<i>(2=\$360, 3=\$540 etc.)</i>
Kinder Backpack (new families)	\$25 per child		
8th Grade Fee	\$150 per child		

Registration/Fundraising Fees - paid in full by April 27th or in 3 payments paid in full by June 15, 2018. Remaining unpaid balance will be applied to SMART TUITION and billed with 2018-19 monthly tuition in July. **A \$50 late fee** will also be charged to account and due on "Registration Check In" day in August.

"As each one has received a gift, use it to serve one another as good stewards of God's varied grace" (1 Pt 4:10). (To Be a Christian Steward A Summary of the U.S. Bishops' Pastoral Letter on Stewardship)

Please select an option to pay Fees & Fundraising for the 2018-19 school year.

- | | |
|--|---|
| <input type="checkbox"/> First or full payment | Due April 27th (All Annual & Specialty Fees Due) |
| <input type="checkbox"/> 2nd payment | Due May 25th (At least 50% of Fundraising Fees Due) |
| <input type="checkbox"/> Final payment | Due June 15th (Remaining balance of Fundraising Fees Due) |

Parent Signature: _____ Date _____

Parent Signature: _____

*Students will **not be eligible** to attend or participate in any field trip or extracurricular activity if an outstanding debt is owed to the school. (Extraordinary circumstances require appointment with principal.)*

VOLUNTEER HOURS

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The tuition and fees cover only a part of the total cost of the education of your children. Therefore, your support

of St. Joseph School by sharing in the work is required between June 1, 2018 and May 31, 2019.

Service Hours (Mandatory)

All families	5 hours Lunch duty/Morning Recess/PE Assistant @ \$10/hr = \$50
1 child	30 hours @ \$15/hr = \$450
2 children	35 hours @ \$15/hr = \$525
3 children	40 hours @ \$15/hr = \$600

Families may choose to pay a \$500.00 Home Assistance Fee instead of working the service hours. Volunteer Service hours will be billed \$15.00 for each hour not worked.

Service hours will be billed periodically throughout the year. An invoice will be generated and provided during Report Card Conferences. $\frac{1}{3}$ of service hours should be complete at the end of each trimester with final hours completed by May 31, 2019. Unpaid hours will be invoiced and sent home with final report card.

Families receiving CEF or other Tuition Assistance are asked to complete additional service hours. Financial Assistance Form and appointment with principal is required.

IF BOTH PARENTS ARE UNABLE TO COMPLETE SERVICE HOURS, THEY MAY ARRANGE TO HAVE A FAMILY MEMBER (18 YEARS OR OLDER) COMPLETE THE HOURS FOR THEM.

TYPES OF VOLUNTEER SERVICE: Please check your preference

- | | |
|--|--|
| <input type="checkbox"/> C.C.D. | <input type="checkbox"/> HEALTH SCREENING |
| <input type="checkbox"/> COACHING | <input type="checkbox"/> SCHOOL LUNCH PROGRAM |
| <input type="checkbox"/> PARISH FIESTA | <input type="checkbox"/> PUBLICITY/MARKETING |
| <input type="checkbox"/> BOOK FAIR | <input type="checkbox"/> CLASSROOM HELP / TUTORING |
| <input type="checkbox"/> DINNER-AUCTION | <input type="checkbox"/> GRANDPARENTS DAY |
| <input type="checkbox"/> ROOM MOTHER/GRADE | <input type="checkbox"/> 7:30 AM MORNING DROP |
| <input type="checkbox"/> YEAR END PLAY DAY | <input type="checkbox"/> HOSPITALITY |
| <input type="checkbox"/> PROJECTS AT HOME | |
| <input type="checkbox"/> OFF ASSISTANCE | |
| <input type="checkbox"/> OTHER SERVICES (SPECIFY: _____) | |

All volunteer service hours are credited for actual hours worked. Documentation of hours must be turned into the office for credit to be given. Parents that do not complete their fiscal responsibilities will be charged for incomplete hours and be required to pay in full.



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2018-19 Application

Student's Legal Name: _____ Sex: M ___ F ___ T-shirt: Child size: ___ Adults Size: ___
Last First Middle

Address: _____
Number & Street City State Zip

Home Telephone: (____) _____ Date of Birth: _____ Birth Place: _____
(City & State)

*Date of Baptism: _____ Church: _____ City & State: _____

*First Communion: _____ Church: _____ City & State: _____

****(new students only)***

Ethnic Origin: American Indian ___ Filipino ___ Asian ___ Black ___
 Hispanic ___ White ___ Pacific Islander ___ Other ___

School Presently Attending: _____ Address: _____

(School will be contacted for reference.) Number & Street City State Zip

Grade Child is in now: ___ Grade placement in Aug.: ___ Parish where your are registered: _____

Are you a supporting member of St. Joseph Parish? Yes ___ No ___ Envelope # _____

(Verification of financial contribution to the parish is required.)

Mother/Guardian:

Father/Guardian:

Relationship if other than mother: _____ Relationship if other than father: _____

Name: _____ (Maiden Name: _____) Name: _____

Employer/Company: _____ Employer/Company: _____

Business Address: _____ Business Address: _____

Title/Position: _____ Title/Position: _____

Work Ph: (____) _____ Cell (____) _____ Work Ph: (____) _____ Cell (____) _____

Email: _____ **Email:** _____

Marital Status: _____ Birthplace: _____ Marital Status: _____ Birthplace: _____

Religion: _____ Religion: _____

Brothers/Sisters Attending St. Joseph School:

Name: _____ Grade in Aug.: _____ Name: _____ Grade in Aug.: _____

Name: _____ Grade in Aug.: _____ Name: _____ Grade in Aug.: _____

How did you learn about our school? _____

Bills will be paid by: _____ Phone: (____) _____

Last name First Middle

Address: _____
Number & Street City State Zip

Signature Required: _____ **DATE:** _____