

# Returning Student Application 2018-2019



Date \_\_\_\_\_

Parent Name \_\_\_\_\_  
Last
Father
Mother

Address \_\_\_\_\_  
Street
City
Zip

Home Phone \_\_\_\_\_ E-mail address \_\_\_\_\_  Check here for "do not publish".

Father Cell Phone \_\_\_\_\_ Mother Cell Phone \_\_\_\_\_

Father Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Mother Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Father Business Phone \_\_\_\_\_ Mother Business Phone \_\_\_\_\_

Person responsible for tuition payment \_\_\_\_\_ Relationship to child \_\_\_\_\_ Marital Status \_\_\_\_\_

**STUDENT NAME**

**GRADE ENTERING**

**BIRTHDATE**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Student/s ethnicity    White, non-Hispanic \_\_\_\_\_    Hispanic \_\_\_\_\_    Native American \_\_\_\_\_  
**√ ONE ONLY**    African American \_\_\_\_\_    Multi-racial \_\_\_\_\_    Asian \_\_\_\_\_

Language spoken at home \_\_\_\_\_

Parish at which family is registered \_\_\_\_\_ St. James Parish Envelope Number \_\_\_\_\_

Public School child/ren would attend \_\_\_\_\_

Means of transportation to school    Walk \_\_\_\_\_    Bus \_\_\_\_\_    Drive \_\_\_\_\_

Do you live more than 1.5 miles from St. James School?    Yes \_\_\_\_\_    No \_\_\_\_\_

Person responsible for tuition payment \_\_\_\_\_ Relationship to child \_\_\_\_\_

Names and ages of *elementary* children not enrolled at St. James

\_\_\_\_\_  
 \_\_\_\_\_

Office use only
Bk/Sup. Fee pd. _____
Check # _____

**Please complete reverse side**

**THANK YOU FOR FILLING OUT ALL INFORMATION COMPLETELY!**

**Photo Release**

On occasion, the school uses photos and/or academic work of students in local publications (e.g., website, yearbook, advertisements, bulletin articles, and other public relations material). By initialing and signing below, I give permission for the school to publish my child/ren’s photo or academic work in any format including group or individual photos.

\_\_\_\_\_ ←  
**Initial here**

**Acceptable Use**

I/we have read the school technology guidelines, and have discussed them with my child/ren. In consideration of the privilege of my child/ren using the school’s electronic communications system and in consideration of having access to the public networks, I / we hereby release the school, its operators, and any institutions with which they are affiliated from any and all claims and damages of any nature arising from my child/ren’s use of, or inability to use, the system, including, without limitation, the types of damage identified in the **Acceptable Use Procedures (AUP)**.

I/we understand that access to the school technology resources is not a private activity and that the school will monitor student activity on any of the school resources including but not limited to the computer system, e-mail system, and other electronic devices and programs.

I/we have read the school’s technology procedures and regulations and agree to abide by these provisions. Violation of these provisions may result in suspension or revocation of system access. I/we also understand that any actions taken through the school network that are in violation of the school disciplinary code will be handled in accordance with the code. Appropriate legal authorities may be contacted if there is any suspicion of illegal activity.

By signing below, I give my child(ren) permission to participate in the school’s electronic communications system including the internet and certify that the information contained on this form is correct.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date