



Application for Admission

VILLA MARIA ACADEMY LOWER SCHOOL

STUDENT INFORMATION

Name of Applicant (First, Middle, Last) _____

Date of Birth _____

Address _____

City _____ State _____ ZIP _____

Home Phone (____) _____ Country of Birth _____

Requesting Admission for Grade _____ Enrollment Year _____

Students must be of the required age by September 1st (3, 4, 5, 6)

Preschool/Prekindergarten Program:

3-Year Old Full Day (3 days: T, W, Th) 4-Year Old Full Day (5 days)

3-Year Old Half Day (3 days: T, W, Th) 4-Year Old Half Day (5 days)

3-Year Old Full Day (5 days)

3-Year Old Half Day (5 days)

FAMILY INFORMATION

Applicant resides with: ___Both Parents ___Father ___Mother ___Stepfather ___Stepmother
___Parents are separated or divorced ___Mother is deceased ___Father is deceased ___Guardian

If divorced, custodial rights are given to _____

(A copy of the custody order must be on file at Villa Maria Academy)

Parents:

Name of Father _____

Address (if different) _____

Father's Home # _____ Father's Cell _____

Father's Email _____ Father's Occupation _____

Title _____ Employer _____

Business Address _____

Business Phone _____ Business Email _____

Name of Mother _____

Address (if different) _____

Mother's Home # _____ Mother's Cell _____

Mother's Email _____ Mother's Occupation _____

Title _____ Employer _____

Business Address _____

Business Phone _____ Business Email _____

Grandparents:

Maternal _____
Address _____

Paternal _____
Address _____

Legacy: Is anyone in your family a graduate of Villa Maria Academy Lower School? ___ Yes ___ No

Full Name _____ Class Year _____ Maiden Name _____

SCHOOL INFORMATION

School District _____ County of Residence _____
Current School _____ Grade _____ (if applicable)

Has your child undergone psycho-educational testing? ___ Yes ___ No
(If yes, please provide a copy with this application)

RELIGIOUS INFORMATION

Religion _____ Parish _____

TUITION ASSISTANCE

___ I am interested in tuition assistance.

Villa Maria Academy Lower School offers need-based financial aid to **qualified K-8 families**. All grants are based on demonstrated financial need. Tuition assistance requests have no impact on the admission decisions made by the Admissions Committee.

By submitting this form and the non-refundable \$75.00 application fee, I understand that the applicant will be considered for admission for the grade and year indicated on this form and that Villa Maria Academy will require transcripts from the applicant’s current school. All information will be held in confidence by the School.

I certify that the statements and information in this application are true and correct and honestly presented.

Parent Signature _____ Date _____

Include the below items with this application to Villa Maria Academy Office of Admissions:

- \$75 non-refundable application fee made payable to: Villa Maria Academy Lower School
- Copy of the child’s birth certificate
- Release of Records Form 1st through 8th grade