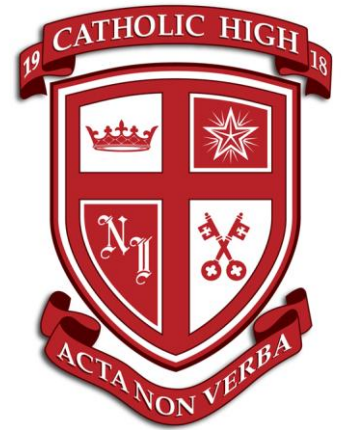


# **APPLICATION FOR ADMISSION 2012-2013**



## **The Mission of Catholic High School**

**Catholic High, New Iberia . . .  
dedicated to the development of 4th – 12th grade students through  
academic excellence and Christ-centered values  
rooted in caring discipline, compassion, and zeal.**

## **Non-Discriminatory Policy**

***Catholic High School makes no discrimination on the basis of race,  
religion or gender in the administration of educational policies,  
application of admission, and extracurricular and athletic programs.***



# ADMISSIONS POLICY

## CATHOLIC HIGH SCHOOL

*“Catholic schools in the Diocese of Lafayette exist to provide solid education in secular subjects but mainly to instill gospel values in our young people.”*

**New students** at Catholic High are admitted under a two-tier system:

**Tier I** is for all students applying for entry into grade four and students from Trinity Catholic School in St. Martinville who are applying for admission into grade nine. This tier also applies to students who apply for admission to Catholic High in any grade from any other Catholic school.

**Tier I priority is as follows:**

1. Priority I: Feeder schools at appropriate grade levels
2. Priority II: Other feeder/Catholic Schools at other grade levels
3. Priority III: Incoming 4th graders from non-feeder schools

Completed application and proper documentation as specified on check-list are required.

**Tier II** is for all other students applying for admission in grades 5-12 currently attending non-feeder and/or non-Catholic schools. Completed application, proper documentation as specified on check-list and admissions interview are required for Tier II applicants.

**Home schooled students** are welcomed to apply for admission to Catholic High. Verification of curriculum approved by the Louisiana State Department of Education must be included with all other required documentation. The application process also includes an admissions interview. Home schooled students must present current standardized test scores that recommend grade placement and records from all schools previously attended. Students may be asked to take the standardized achievement test administered by the school for their grade levels if application for admission is received prior to Catholic High school testing dates. These students must also attend a meeting with C.H.S. administration to review the home school program of study and consent to a one semester academic review period.

***All admissions are provisional until year-end data and evidence of passing the LEAP Test (grade 4 and grade 8 only) have been submitted.***

Verification of alumni affiliation may be requested in some cases.

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# APPLICATION FOR ADMISSION CATHOLIC HIGH SCHOOL

FOR OFFICE USE ONLY:

Tier I: \_\_\_\_\_

Applying for school year: \_\_\_\_\_ - \_\_\_\_\_

Tier II: \_\_\_\_\_

Applying for grade: \_\_\_\_\_

## APPLICANT INFORMATION

Full name of applicant: \_\_\_\_\_  
(Last) (First) (Middle) (Nickname)

Home Address: \_\_\_\_\_  
(Mailing Address) (City, State, Zip Code)

Student e-mail address : \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Student Cellular Phone: \_\_\_\_\_

Present School: \_\_\_\_\_ Public School District Of Residence: \_\_\_\_\_

Circle one: Male Female Social Security Number: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_ Home Church: \_\_\_\_\_

Registered Member: Yes No

### Student's Racial/Ethnic Background

African-American  Asian  Bi-Racial  Other

Caucasian  Hispanic  Native American

Does applicant currently have siblings enrolled at Catholic High? Yes No

Does applicant have siblings who graduated from Catholic High within the past five years? Yes No

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**FAMILY INFORMATION:**

**APPLICANT LIVES WITH (PLEASE CHECK):**

**CIRCLE ALL APPLICABLE:**

- Mother & Father     Legal Guardian  
 Mother             Stepfather  
 Father                 Stepmother

- Parents separated\*    Parents divorced\*  
 Father deceased        Father remarried  
 Mother deceased        Mother remarried

*\*If parents are divorced or separated, to whom should admissions and/or billing correspondence be sent? (Circle one)    Father    Mother    Both    Other (specify) \_\_\_\_\_*

**Complete the following information. Please print clearly:**

	FATHER'S INFORMATION	MOTHER'S INFORMATION
<b>Last Name:</b>		
<b>First Name:</b>		
<b>Street Address:</b>		
<b>City, State, Zip:</b>		
<b>Email Address:</b>		
<b>Home Phone:</b>		
<b>Cellular Phone:</b>		
<b>Employer:</b>		
<b>Position/Title:</b>		
<b>Business Address:</b>		
<b>Business Phone:</b>		
<b>High School Attended:</b>		
<b>Graduation Year:</b>		
<b>College Attended:</b>		
<b>Graduation Year:</b>		
<b>Degree:</b>		
<b>Additional Degrees or Certifications:</b>		

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Please complete the following information, if applicable:

	STEP-FATHER'S INFORMATION	STEP-MOTHER'S INFORMATION
<b>Name:</b>		
<b>Email Address:</b>		
<b>Cellular Phone:</b>		
<b>Employer:</b>		
<b>Position/Title:</b>		
<b>Business Address:</b>		
<b>Business Phone:</b>		
<b>High School Attended:</b>		
<b>Graduation Year:</b>		
<b>College Attended:</b>		
<b>Graduation Year:</b>		
<b>Degree:</b>		
<b>Additional Degrees or Certifications:</b>		

### Sibling Information:

Name: _____	School: _____	Grade/Grad. Yr.: _____
Name: _____	School: _____	Grade/Grad. Yr.: _____
Name: _____	School: _____	Grade/Grad. Yr.: _____
Name: _____	School: _____	Grade/Grad. Yr.: _____
Name: _____	School: _____	Grade/Grad. Yr.: _____

### Grandparent Information:

	Maternal Grandfather	Maternal Grandmother
<b>Name:</b>		
<b>Email Address:</b>		
<b>Home Phone:</b>		
<b>Cellular Phone:</b>		
<b>Business Phone:</b>		
<b>Nickname called by child:</b>		

	Paternal Grandfather	Paternal Grandmother
<b>Name:</b>		
<b>Email Address:</b>		
<b>Home Phone:</b>		
<b>Cellular Phone:</b>		
<b>Business Phone:</b>		
<b>Nickname called by child:</b>		

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## EMERGENCY CONTACTS:

Please include all contact information. In case of parent/grandparent, write name and reference to previous page's contact information.

	CONTACT #1	CONTACT #2	CONTACT#3	CONTACT #4
<b>Last Name:</b>				
<b>First Name:</b>				
<b>Relationship to Student:</b>				
<b>Address:</b>				
<b>Home Phone:</b>				
<b>Cell Phone:</b>				
<b>Work Phone:</b>				
<b>Email:</b>				

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**PLEASE READ AND SIGN BEFORE SUBMITTING:**

***I understand that completion of this application and submission of all requested information is required before the application will be processed and an admissions rank number will be assigned. I also understand that all information must be updated yearly and submitted to the Catholic High School admissions office during the reenrollment period.***

***I attest that all of the information contained in this application is true and correct to the best of my knowledge. I hereby authorize representatives of Catholic High-New Iberia to verify the information contained in this application.***

**X**

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

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY:**

Tier I: \_\_\_\_\_ Interview Date: \_\_\_\_\_ Administrator: \_\_\_\_\_

Tier II: \_\_\_\_\_ Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_

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