

VENERINI ACADEMY

APPLICATION FOR ADMISSION

Date of Application: _____

STUDENT INFORMATION

Grade Entering September 2017: _____

Student's Name: _____ Male/Female
(Last) (First) (Middle)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Unlisted: Yes/No Cell: _____

Date of Birth: _____ City: _____ State: _____

Date of Baptism: _____ Parish: _____ City/State: _____

Holy Eucharist: _____ Parish: _____ City/State: _____

Family Parish: _____ Active/Inactive (circle one)

School Presently Attending/ Current Grade: _____

School Address: _____

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27 Edward Street, Worcester, MA 01605 • Phone: 508-753-3210 • Fax: 508-754-6050 • www.veneriniacademy.us

PARENT INFORMATION

Father's Name/ Parent 1: _____ Religion: _____
(Last) (First) Middle

Married / Separated / Divorced / Deceased/ Not Married (Circle One)

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Work Phone: _____ Email: _____

Employer: _____ Position: _____

Mother's Name/ Parent 2: _____ Religion: _____
(Last) (First) (Middle)

Married / Separated / Divorced / Deceased/ Not Married (Circle One) Maiden Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Work Phone: _____ Email: _____

Employer: _____ Position: _____

SIBLING INFORMATION

Name	Age	Present School/Grade
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ADDITIONAL STUDENT INFORMATION

Please describe your child. Specifically discuss talents and interests, strengths and weaknesses, areas or subjects in which your child might benefit from special encouragement or individualized instruction.

Please answer the following questions about your child. If **YES** is circled, please explain the details in space provided below.

- Is your child on an Individual Educational Plan (IEP)? **Yes/No** (*If yes, please submit a copy of plan with this application*)
- Have there been any particular circumstances which have affected your child’s school record? *Example: poor health, specific learning differences, frequent changing of schools, etc...* **Yes/No**
- Has your child received special tutoring or psychological counseling? **Yes/No**
- Has your child skipped or repeated a grade? **Yes/No**
- Does your child suffer from allergies? **Yes/No**
- Does your child require special medication? **Yes/No**
- Additional circumstances? **Yes/No**

Please discuss any of the above situations. Be sure to list dates when appropriate, allergies & medications, and any other pertinent details.

What expectations of your child do you have at Venerini Academy?

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REQUIREMENTS FOR ADMISSION

Pre-K and K

1. Admissions Application
2. **A \$50.00 non-refundable application fee**
3. A **one-on-one placement test** (Kindergarten) and a **family interview** with the Admissions Team
4. Birth Certificate
5. Medical Forms and Immunization Records (prior to entrance in September)
6. **A \$350.00 non-refundable registration fee within a month of acceptance (applied to tuition)**

Grades 1 – 7*

1. Admissions Application
2. **A \$50.00 non-refundable application fee**
3. A **placement exam** in Reading and Math and a **family interview** with the Admissions Team
4. Birth Certificate (Grades 1-5)
5. Medical Forms and Immunization Records (prior to entrance in September)
6. A letter of recommendation from a teacher or guidance counselor (**Grades 6-7**)
7. Recent Academic/Standardized test records. Permanent Records from previous school.
8. A list of documented accommodations for the Head of School's review and approval
9. **A \$350.00 non-refundable registration fee within a month of acceptance (applied to tuition)**

**Venerini Academy does not traditionally accept students entering Grade 8*

If a child is absent for an extended period of time, the School would presume that the parents would have an obligation to continue to make tuition payments.

The School, after consultation, retains the right to decide at any time if a child should be removed permanently or temporarily from the School. The Administration may deem such action necessary or advisable either in the interest of the pupil or for the good of the School.

The parent/guardian understands and agrees that the information on this application and any other information received in connection with this application shall be held in confidence. In the Admission decision making, the Head of School may disclose any or all of the admission information and any other information received in connection with this application to those directly involved in the admission decision making.

Venerini Academy reserves the right to accept only those students whom the Admission Committee feels will benefit from the education offered at Venerini Academy. Newly admitted students will be on probation for the first trimester. At that time, their status will be reviewed. Parents will be notified if the student is not achieving academic success or if there are behavioral issues that are in conflict with the Venerini Academy Mission.

I hereby accept the terms and conditions set forth above.

Signature of Parent/Guardian

Date

APPLICATIONS WILL NOT BE PROCESSED UNLESS A \$50.00 PER STUDENT APPLICATION FEE ACCOMPANIES THIS FORM.

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