



ST. JOHN BOSCO CATHOLIC SCHOOL

730 W. Maple Street, Sturgeon Bay, WI 54235, Ph: 920-743-4144, Fax: 920-743-4106

Received: _____

Fee Pd.: _____
Amt. Date

2024-2025 APPLICATION FOR ADMISSION

STUDENT/S	Name			Grade 2024-2025	M/F Gender	Sacraments Received		
	First	Middle	Last			Birth Date	Baptism	Reconciliation
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Parish Affiliation: _____ Religion: _____ School District where you reside: _____

How do you plan to transport your child to and from school? SB Bus SD Bus Sev Bus Parent Transport

School Last Attended (for new students) _____

FATHER

First Name: _____

Last Name: _____

Address: _____

City: State: Zip: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email: _____

Place of Employment: _____

Occupation: _____

MOTHER

First Name: _____

Last Name: _____

Address: _____

City: State: Zip: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email: _____

Place of Employment: _____

Occupation: _____

Applicant(s) live(s) with: _____ Parents _____ Mother _____ Father _____ Other _____

Is English the primary language used in your household? _____ Yes _____ No

****If no, please fill out a Home Language Survey.**

Does your household have access to internet services? _____ Yes _____ No

New Families Only:

How did you learn about St. John Bosco School? _____

Ethnicity – What is the student(s) ethnicity?

Hispanic or Latino _____ Not Hispanic or Latino _____

Race – What is the student(s) race? Mark one or more to indicate what the student(s) considers himself/herself to be (for statistical purposes only)

_____ American Indian/Alaska Native _____ Native Hawaiian/Other Pacific Islander _____ White
_____ Black or African American _____ Asian

Please Check All That Apply:

___ Married ___ Divorced ___ Separated ___ Father Deceased ___ Mother Deceased
___ Father Remarried, Name of Spouse _____
___ Mother Remarried, Name of Spouse _____

If applicant’s parents are divorced, which parent has legal responsibility for:

Custody* of Student: _____ School Bills: _____

*Divorced parents are asked to provide the school with a copy of the divorce custody order.

I give permission to use my child’s picture for the school website, newsletter, or promotional materials?

___ Yes ___ No

I give permission to publish the following in the school directory:

___ Family’s names ___ address ___ home phone # ___ cell #
___ Email address (please indicate which address you want listed): _____

I give permission to share my child’s immunization record with the Wisconsin Immunization Registry & my Immunization Provider for the purpose of maintaining a complete and accurate record to assist in assuring full immunization? ___ Yes ___ No

Financial Aid:

_____ **If applying for financial aid, check here. All financial aid applications are made on line and are available now. Please go to <https://online.factsmtg.com/aid> to complete the application. Applications are due April 1, 2024.**

All families receive information regarding free and reduced lunch in the fall.

Notice of Non-Discrimination Policy: St. John Bosco Catholic School does not discriminate on the basis of race, color, creed, nationality nor ethnic origin in the admission of students or in the administration of its educational policies, admissions policies, financial aid or athletic programs.

Signatures:

Father/Guardian _____ Date _____
Mother/Guardian _____ Date _____

Please be sure to return the following:

Application Form
***Registration fee of \$50.00 per child; however, if completing online or with credit card, fee will be \$55.00**

New Students Only: Request for Records Transfer Form (if transferring from another school)
Current Immunization Records (due by first day of school)
Certified copy of birth record (shown for birth date confirmation)

** The registration fee is non-refundable and must accompany the application. Applications without the fee will not be processed.*