



HOLYFAMILY GRADE SCHOOL

400 South Louise Street

Glendale, CA 91205

(818) 243-9239 (Ex. 110)

www.hfgsglendale.org

2020 – 2021

Holy Family Grade School is a Catholic elementary school community whose purpose is to educate the whole child through spiritual development, a curriculum with high academic standards, the arts and physical education. We strive to inspire our students with the knowledge and values that will lead them to be faithful Catholics throughout their lives.

HOLY FAMILY GRADE SCHOOL APPLICATION FOR REGISTRATION

PLEASE CIRCLE GRADE – TK K 1 2 3 4 5 6 7 8

(USE ONE REGISTRATION FORM FOR EACH CHILD.)

FORMS REQUIRED:

- Birth Certificate
 - Baptismal Certificate
 - First Holy Communion
 - Copy of Social Security
 - Immunization Record (TK, K, & 1) – **Proof of Tuberculin Test Required**
 - Recent Report Card (Grade 2 – 8 applicants)
- (Conduct and effort grades must be satisfactory.)

ORDER OF ACCEPTANCE – will depend on grade level seat available, placement test, family and student interviews, submission of records, and most importantly, regular Mass attendance for all Catholic families.

- Brothers and sisters of those already in the Grade School
- Registered, contributing parishioners
- Catholics outside of the Parish
- Non-Catholics

Openings for all grades depend on space availability.

There is a \$30.00 nonrefundable application/testing fee per child.

Registration Fee of \$400.00 is non-refundable.

TK Age 4 --- Testing determines acceptance.
Kindergarten Age 5 --- Testing determines acceptance.
Grade 1 Age 6 --- Testing determines acceptance.

GRADE OF CHILD in August, 2019 _____ Boy _____ Girl _____

CHILD:

Last Name _____ First _____ Middle _____

Address _____ Home #: _____
Number Street City Zip

Birthdate _____ Place of Birth _____

Baptized? Yes _____ No _____
Date

Church Where Baptized _____ City _____

Social Security Number _____

Child Made First Communion? Yes _____
Name of Church and City Date

FATHER: Last Name _____ First _____ Middle _____

Place of Birth _____ Living? Yes _____ No _____

Religion _____ Married _____ Divorced _____ Separated _____ Widowed _____

Ethnicity _____ Occupation _____

E-mail Address _____ Cell Tel. No. _____

MOTHER: Last Name _____ First _____ Middle _____

Maiden Name (Last name before marriage) _____

Place of Birth _____ Living? Yes _____ No _____

Religion _____ Married _____ Divorced _____ Separated _____ Widowed _____

Ethnicity _____ Occupation _____

E-mail Address _____ Cell Tel. No. _____

Child Lives With: Father and Mother _____ Father Only _____ Mother Only _____

Mother/Step Father _____ Father/Step Mother _____

Guardian _____ Name of Guardian _____

If there is a need to mail correspondence to the family, how should it be addressed?

Mr. and Mrs. ___ Mr. ___ Mrs. ___ Ms. ___ Name _____

If different than above address please indicate: _____

School child now attends: _____

Address of school _____
Address City Zip

How long did your child attend the above school? _____

Does your child currently attend Religious Education classes? _____ Where? _____

Are you a registered, contributing member of Holy Family Catholic Community?

Yes _____ How long? _____ Envelope Number _____

No, not registered at Holy Family _____

Registered in another Parish? _____
Name of Church and City

If registered at Holy Family Catholic Community, what ministry are you a part of?

Important:

- 1 Immunization must be up-to-date prior to start of school.
- 2 Every family is required to enroll in FACTs Tuition Collection Management System.
- 3 All families are required to support fundraising efforts, and any Capital Improvement Projects.
- 4 All school rules and policies must be followed.
- 5 The school has the right to refuse acceptance of application.

Why do you want your child to come to Holy Family Grade School?

Name of person filling out this application _____ Date _____

Other children in family applying at Holy Family? Yes ____ No ____

If yes, name/names and grades in August:

_____	_____
Name	Grade
_____	_____
Name	Grade

How did you come to know about Holy Family Grade School?

Internet _____ Alumni _____ Church _____

Referral by : _____

Other: _____

[For office use only]

[Originals Required]

VERIFICATION OF DOCUMENTS BY SCHOOL PERSONNEL

Birth Certificate _____ (Please initial after verification.)

Baptismal Certificate _____ (Please initial after verification.)

FHC Certificate _____ (Please initial after verification.)

Social Security Card _____ (Please initial after verification.)

Immunization Record _____ (Please initial after verification.)

Recent Report Card _____ (Please initial after verification.)
(Grade 2-8 Applicants)

Other Forms(s) of Enrollment Eligibility _____ (Please initial after verification)

Signature of School Personnel

Date

Child Tested: Yes _____

No _____

Date

Testing Fee: \$30.00 Yes _____ No _____

Registration Fee: \$400.00 Yes _____ No _____

FACTS: _____