



Registration Steps for Returning Students 2011-2012

(Students currently enrolled at Saint Francis International)

The following steps are required to register for the 2011-2012 school year.

- Complete the ENTIRE Re-Registration Packet
 - Review the Re-Registration Form (white), make any corrections to information the school has provided and fill in all lines where information is needed. Be sure to sign the Re-Registration Form.
 - Complete the Annual Religion Verification Form (purple). In order to receive the Catholic Parishioner Grant, the form *must* be signed by your pastor or his delegate such as the parish secretary.
 - Complete and sign the agreement and consent forms (yellow).

- Attach a non-refundable registration fee of \$100.00 – check or money order made out to Saint Francis International School. This fee is charged for each student you are registering. If you have more than one student in your family, you will need to pay the \$100 registration fee for each child to be registered at Saint Francis International School.

- Return the Re-Registration Form and fee **to school** by the deadline, Monday, January 31, 2011 (if you have multiple children, please return all of your children's Re-Registration packets together).

Once your Re-Registration packet is received and the school receives the results of the PSAS process, you will be notified of when you will receive a tuition agreement for 2011-2012.

**Registration form and fee are due to school by
Monday, January 31, 2011.**

Please note:

All siblings/students who will be new to Saint Francis International School next year (students not currently enrolled at Saint Francis International School for the 2010-2011 school year) must complete a New Student Application Form. Please contact the office to obtain a New Student Application Packet.



RE-REGISTRATION FORM

FORM 2

ARCHDIOCESE OF WASHINGTON – Catholic Schools Office

School Name: Saint Francis International School Date: _____
 School Year: 2011-2012 Applying for Grade: _____

Information for Student Requesting Re-registration

Student Name: _____
Last First M.I. (Jr., III)

10-11 Grade: _____ Sex: _____ Date of Birth: _____
mm/dd/yyyy

Place of Birth: _____
City State Country

Home Address: _____
Street Address Suite #

_____ *City State ZIP Code*

Email Address: _____
Please provide an email address where all official school communication may be sent.

Please Update Any Changes in Family Information

	Mother	Father
Full Name	_____	_____
Maiden Name	_____	_____
Country of Birth	_____	_____
Home Address	_____	_____
Home Phone	_____	_____
Cell Phone	_____	_____
Preferred Email	_____	_____
Occupation	_____	_____
Employer	_____	_____
Work Phone	_____	_____
Religion	_____	_____
Parish/Church	_____	_____

Parents' Marital Status: Single Married Separated* Divorced*
Please check all that apply Mother Deceased Mother Remarried Father Deceased Father Remarried

*** NOTE:** Parents who are (or become) divorced, separated, unmarried, or who have any other special circumstances regarding the custody of their children must provide the school with a current court order or decree of custody for the student's file. Any other specific instructions regarding release of the child or his/her records must be in writing and signed by the parent or parents with court-ordered legal custody. All parents/guardians with legal authority to make educational and religious decisions on behalf of the applicant must sign this form.

Student lives with: Mother and Father Mother Only Father Only
 Legal Guardian (*Please complete the information below*):

Full Name _____
Country of Birth _____
Home Address _____
Home Phone () - _____
Cell Phone () - _____
Preferred Email _____
Occupation _____
Employer _____
Work Phone () - **Ext.** _____
Religion _____
Parish/Church _____

Person responsible for Tuition/Fee Payments: _____

Update Emergency Contact Information

Please list the names of two adults who should be contacted in the event of an emergency if parents listed above cannot be reached

Contact #1: _____
Last *First* *M.I.* *(Jr., III)*
Relation to Student: _____ Email Address: _____
Home Address: _____
Street Address *Suite #*
City *State* *ZIP Code*
Home Phone _____ Other Phone _____

Contact #2: _____
Last *First* *M.I.* *(Jr., III)*
Relation to Student: _____ Email Address: _____
Home Address: _____
Street Address *Suite #*
City *State* *ZIP Code*
Home Phone _____ Other Phone _____

Parent/Guardian Acknowledgment and Request for Re-registration

I/We, the undersigned parent(s), understand and acknowledge that this re-registration request does not guarantee our child's registration at **Saint Francis International School** for the School Year **2011-2012**. I/We understand and acknowledge that registration is contingent upon compliance with all applicable policies and procedures regarding archdiocesan and school-based registration, including, but not limited to, health examinations and immunizations. By the first day of the next school year, all students in Catholic schools in the Archdiocese are to be immunized in accordance with the immunization requirements and the guidelines of the Archdiocese. Exemptions are provided only on a temporary basis to those with a physician-documented medical contraindication.

I/We understand and acknowledge the Roman Catholic religious nature of the school from which our child is requesting registration. I/We will not publicly repudiate the teachings and traditions of the Roman Catholic Church, and I/we will respect and support the unique identity that the school derives from its Catholic faith. As the primary educator(s) of the applicant, I/we will not act in ways that contradict the Catholic nature of the school. I/we shall cooperate fully with the school and the student shall participate in all required school programming, including instruction in the Catholic faith and attendance at Mass. As the primary educator(s) of the student, I/we agree to act in ways that promote the best interests of the church and school and will comply with the policies of the Archdiocese of Washington and **Saint Francis International School**. I/We hereby confirm that the following documents, required to be considered for re-registration, including the non-refundable re-registration fee of **\$100.00**, accompany this form:

<u>ALL STUDENT REQUESTING</u>	
<u>RE-REGISTRATION MUST SUBMIT:</u>	
<input type="checkbox"/>	Non-Refundable Re-Registration Fee of \$100.00
<input type="checkbox"/>	Annual Religion Verification Form (purple)
<input type="checkbox"/>	Technology and Internet Usage Agreement (yellow)
<input type="checkbox"/>	Consent to Initial Counseling Services (yellow)
<input type="checkbox"/>	Transportation Permission Form (yellow)
<input type="checkbox"/>	Publicity Release Form (yellow)
<input type="checkbox"/>	Allergy Agreement and Action Plan (<i>If Applicable – contact school nurse for a copy</i>)
<input type="checkbox"/>	Copy of current custody order, or other applicable court orders (<i>If Applicable</i>)
<input type="checkbox"/>	All current evaluations/assessments and special education plans (<i>If Applicable</i>)

We hereby acknowledge that all the information contained in this RE-REGISTRATION FORM and the accompanying documents is accurate and truthful. I/We agree to pay all of applicant's tuition and fees when due.

Names of Parents/Guardians:

Mother

Father

Signatures:

Sign and date

Sign and date

*All parents/guardians with legal authority to make educational and religious decisions on behalf of the applicant must sign this form.

STUDENT RE-REGISTRATION REVIEW FORM

OFFICE USE ONLY

Applicant Name: _____
Last *First*

Principals: Re-Registration are not reviewed until the Re-registration Fee is paid and ALL documentation received, except immunization documentation is due by first day of school.

Re-registration must be signed by both parents. If parents are not married, all persons with legal authority to make educational and religious decisions on behalf of the applicant must sign the application.

Check ✓ and Date when each item is received and verified

All Re-registration Documents Reviewed: _____
 Re-registration Fee Paid: _____

If Applicable:

Allergy Agreement : _____
 Custody Decree: _____

In Database: | |

RELIGION: Catholic Other: _____

PARISH: St. Camillus St. Mark Our Lady of Viet Nam Other: _____

PARISH VERIFICATION FORM: Yes / Envelope # _____ No

STATUS: Accepted: _____ Denied: _____

Grade: _____ Room Number: _____

Homeroom Teacher: _____

PERSON RESPONSIBLE FOR TUITION/FEE PAYMENT

Name: _____

Address: _____

Phone Number: _____

NOTES: _____



Annual Religion Verification Form

Dear Parents/Guardians:

Thank you for choosing a Catholic school. There are many sacrifices involved in making the choice to embrace Catholic education. At Saint Francis International School it is our practice of discounting the tuition for active parishioners of Catholic parishes in the Archdiocese of Washington. We do this because our school receives significant financial support from our sponsoring parishes and the Archdiocese of Washington as a whole. Active and vibrant parishes make it possible for these groups to support us so we have chosen to provide grants to families who actively participate in parish life. Therefore, because the parishioner grant is based on the assumption that families who receive the discount are supporting the school through their parishes we require families to verify with their pastor that they are active and participating parishioners. Families that are not active and participating members of parishes in the Archdiocese of Washington are expected to pay a tuition rate that is closer to the actual cost of educating their children. If you have any extenuating circumstances that you would like to discuss, please contact the school office.

Thank you for your cooperation!

Guidance on criteria for determining "active and participating" parishioner can be found on the back of this form ⇨

La información en español la puede encontrar al reverso de esta forma ⇨

Name(s) of children registered at SFIS: _____

Name(s) of parishioner parent(s): _____

Address: _____

Phone Number: _____

Religion: Catholic (*continue below*) Other (*please name*): _____

Parish: St. Camillus St. Mark Our Lady of Viet Nam Other _____
Parish Name *Location*

Please indicate your level of participation in the life of your parish.

YES NO I (we) have been registered in the parish for at least 6 months.

YES NO I (we) attend Sunday Mass in my (our) parish more than 30 times per year.

YES NO I (we) contribute financially to the parish at a level proportional to my (our) ability.

YES NO I (we) contribute my (our) time and talent to the life of the parish.

My (our) offertory envelope number is: _____

Signature of Parishioner Parent(s): _____

Signature of Pastor (or delegate): _____

Date: _____

Pastor's Name: _____

{PARISH SEAL}

Instrucciones en español

Gracias por inscribir a su hijo(a) en la escuela Internacional San Francisco.

Sabemos que este es un gran sacrificio elegir la educación Católica para sus hijos. Es nuestro deseo ayudar a las familias que están activamente involucradas en la Iglesia para que les sea posible enviar a sus hijos a la escuela Católica.

Si usted es miembro de cualquier Iglesia Católica dentro de la Arquidiócesis de Washington, por favor lleve esta solicitud a la oficina parroquial y ellos le ayudarán a completarla, después por favor devuelva esta solicitud a la Escuela Internacional San Francisco. Usaremos esta solicitud para determinar si es elegible para cuotas reducidas para sus hijos. Usualmente las familias que asisten regularmente a Misa y están involucradas en la Iglesia reciben estos descuentos.

Por favor sepa que siempre mantendremos toda su información privada. Si tiene cualquier pregunta, por favor comuníquese a la oficina de la escuela al (301) 434-2344.

Guidance for Verifying Active and Participating Parishioners

According to Archdiocesan policy it is the responsibility of the pastor of each parish to determine if an individual or family is considered “active and participating” in the life of his parish church. The sponsoring pastors of Saint Francis International School use the following guidance to help make that determination:

Registration

Registration at the parish office demonstrates commitment to the life and ministry of the Catholic Church. One must be officially registered and show evidence of being involved in the life of the parish (usually through the use of the envelope system) for at least 6 months as a parishioner, as recorded in the parish database. If recently registered as a parishioner (less than 6 months), a statement from the former parish of “active and participating” status at the parish will be accepted to qualify for tuition discount until regular parishioner status at the current parish can be established. The registration requirement typically applies to the custodial parent/guardian of child and assumes the child participates in the life of the parish with that parent.

Regular Attendance

The Sunday Eucharist is the foundation and confirmation of all Christian practice. Attending Mass on Sundays and Holy Days is a responsibility of all Catholics that allows the members of the Church to build their relationship with Christ and His community of disciples (c.f. CCC 2181). Parents of Catholic students should be particularly aware of this teaching of the Church, as they have solemnly promised God to raise their children accordingly to the law of Christ and His Church at their child’s baptism.

The easiest way to demonstrate one’s attendance at Sunday Mass is by participating in the parish envelope system.

For the sponsoring parishes of SFIS the use of at least two envelopes per month in the Sunday collection, even if those envelopes contain a minimal financial contribution, will be considered adequate evidence of regular attendance. Those families signed up on monthly auto withdraw for their tithing will need to place an empty contribution envelope in the collection at least twice a month. Envelopes dropped off or mailed to the parish office are accounted for but do not fulfill the requirements of regularly attending Mass.

Support of the Parish Life

The reason a grant is offered to an “active and participating parishioner” is because they are already supporting the parish by way of their time, talent, and treasure. The level of financial support will vary from family to family depending on the family’s income and situation.



TECHNOLOGY AND INTERNET USAGE AGREEMENT

ARCHDIOCESE OF WASHINGTON – Catholic Schools

Student Responsibilities

When using any Technology Equipment, all students:

- Shall use all Technology Equipment, including, but not limited to computers, networking systems, Internet, mobile devices, communication devices, cell phones, email, social networking sites, calculators, DVD players, and cameras (“Technology Equipment”) with care and respect, whether at school, at home, or elsewhere.
- Shall not type, send or otherwise use any inappropriate or offensive words, or display, send, or otherwise use inappropriate or offensive images, sounds or messages from or on Technology Equipment.
- Shall not use Technology Equipment in a manner which violates any local, state or federal laws.
- Shall immediately report to a teacher or supervising staff member any inappropriate material or misuse of Technology Equipment of which the student becomes aware.
- Shall not use Technology Equipment in any way to engage in cyber-bullying behavior.

When using the School’s Technology Equipment, all students:

- Shall not reconfigure any school hardware, software, or network settings.
- Shall print, download, or otherwise transfer only that information approved by the teacher or supervisor.
- Shall obtain the permission of a teacher or supervisor before loading a file or disk onto a school computer.
- Shall not use any school Technology Equipment to create, store, transfer or use software or electronic content in a manner which violates the rights of the holder of copyright in the software or the content; and shall not plagiarize works found on the Internet or elsewhere.
- Shall not load any software onto school computers without first obtaining the teacher’s permission.
- Shall only use the Internet for school-related projects and shall visit only the sites assigned by the teacher.
- Shall not ‘surf’ the Internet or visit ‘Facebook,’ or any other social networking websites while at school.
- Shall not log-on to the Internet without permission from a teacher or supervising staff member.
- Shall not give out, post, or otherwise distribute personal information such as photographs, home addresses, telephone numbers, parents’ work addresses or telephone numbers or the name and location of the school.

All students understand and acknowledge:

- Student use of cell phones and any other electronic mobile devices during school hours is strictly prohibited, except in the case of a medical emergency.
- That any violation of this policy may result in permanent revocation of their technology privileges and other disciplinary action may be taken in the sole discretion of the principal.
- That use of all Technology Equipment may be monitored.
- That the school reserves the right to access a student’s computer files or any other Technology Equipment when required for the maintenance of the school’s technology equipment, in emergencies, in the course of investigation of possible wrongdoing, or at the discretion of the principal.

Parent/Guardian Acknowledgement

- Parent/guardian shall be responsible for reading and reviewing the terms listed above with their child.
- Parent/guardian shall be responsible for any damages, claims and expenses resulting from their child’s misuse of the school’s Technological Equipment in violation of this agreement.
- Parent/guardian acknowledges that any failure to honor the terms of this agreement may result in disciplinary action determined at the discretion of the Principal, any or all of the student’s technology privileges being revoked, and/or the reporting of such infraction to appropriate authorities.

Parent/Guardian acknowledges that they have read and reviewed the terms of acceptable technology use with the student listed below, and both parent and student understand and agree to abide by those terms.

Student’s Name

Parent/Guardian Name

Student’s Signature

Date

Parent/Guardian Signature

Date



ARCHDIOCESAN CATHOLIC SCHOOL CONSENT FOR INITIAL COUNSELING SERVICES

Archdiocese of Washington – Catholic Schools

All parents or guardians of Archdiocesan Catholic school students must read and sign this form to acknowledge and consent to initial school counseling services that may be rendered to students by school or archdiocesan personnel in the event of a crisis, referral, or some other school-related matter during the school day. This document does not serve to enroll a student in on-going school counseling services or to permit on-going school counseling services.

Acknowledgment and Consent

I, _____ acknowledge and consent to

Print Your Name

counseling services that may be rendered to _____

Print Student's Name

(the "Student") by school or archdiocesan personnel in the event of a crisis, a referral, or some other school-related matter occurring throughout the school day. I understand that I will be notified if such services are rendered.

I understand and acknowledge that counselors will not share confidential information with others except when authorized school personnel have a legitimate, educational need to have the information; when a student intends to harm himself/herself or another individual; when necessary to prevent clear and imminent danger; when a parent of a student or an emancipated student provides a written statement authorizing the release of information; or in other situations as required by law.

When necessary and appropriate, school counselors may make a referral to outside resource(s). I understand that counselors will make their best efforts to inform me of applicable resources and will provide reasonable assistance in making the transition to minimize interruption of counseling services.

I, hereby, acknowledge and consent to initial counseling services for my child and agree to fully collaborate with the school counselor and the school administrators when necessary.

Name of Parent/Guardian: _____

Please Print

Signature of Parent/Guardian: _____

Sign Your Name

Date _____

Today's Date



TRANSPORTATION PERMISSION FORM

ARCHDIOCESE OF WASHINGTON – Catholic Schools

For any student to be transported from school after daily dismissal, this form must be completed and signed by the parent/guardian of the student prior to pick-up.

Student's Name: _____ Sex: Male Female Birth Date: _____
mm/dd/yyyy

Home Address: _____

Home Phone: () - - Alt. Phone: () - - **Ext.**

Acknowledgment and Consent

I, _____, am the only individual permitted to transport my child.
Parent/Guardian's Full Name

OR

I, _____, grant permission for my child, _____, to be transported from **Saint Francis International School** after regular, daily dismissal by the following individual(s):
Parent/Guardian's Full Name *Print Student's Name*
School Name

Individual #1:

Relation to Student: _____ Last First M.I. (Jr., III) Email Address: _____

Home Address: _____
Street Address *Suite #*

Home Phone _____ City State ZIP Code
() - - Other Phone () - - **Ext.**

Individual #2:

Relation to Student: _____ Last First M.I. (Jr., III) Email Address: _____

Home Address: _____
Street Address *Suite #*

Home Phone _____ City State ZIP Code
() - - Other Phone () - - **Ext.**

I understand and agree that any requests for alternative transportation arrangements, such as early dismissal or medical appointments, must be in a written note from the myself or another parent/ legal guardian that is signed and dated on the day of the request prior to dismissal.

Name of Parent/Guardian: _____
Print Parent/Guardian Full Name

Signature of Parent/Guardian: _____ Date: _____
Sign Your Name *Today's Date*



Publicity Release Form

ARCHDIOCESE OF WASHINGTON – Catholic Schools

Saint Francis International School (SFIS)

SFIS and the Archdiocese of Washington have opportunities throughout the year to promote Catholic education through news stories in radio, TV, print and electronic media.

Permission is hereby granted to SFIS and the Archdiocese of Washington to use the voice/audio recordings, photographs, video and quotations of _____

Print Name of Participant

to assist in community awareness, educational efforts and related public relations purposes, including media coverage of school events and activities and public relations/advertising that may include brochures, posters, print, radio, internet, TV or any other electronic media.

In exchange for the opportunity to participate in the community awareness programs, educational efforts and related publicity endeavors of SFIS and the Archdiocese of Washington, I, hereby, agree to release and hold harmless SFIS, the Archdiocese of Washington and their agents, servants and employees from any and all claims, demands, causes of action and/or liability of whatever kind or nature arising out of or connected to the use of said voice/audio recordings, photographs, video and quotations.

I hereby waive any right to compensation, fee or royalty for myself, the participant/student or our successors, heirs or assigns in connection with the production or use of the aforesaid materials.

If Participant is a minor,

Name of Participant: _____
Please Print

OR

Name of Parent/Guardian: _____
Please Print

Signature of Participant: _____
Please Sign

Signature of Parent/Guardian: _____
Please Sign

Home Address: _____
Street Address *Suite #*

_____ _____
City *State* *ZIP Code*

Dated: _____
Month/Day/Year