

# MADONNA DEL SASSO SCHOOL



**ALL NECESSARY DOCUMENTATION FOR A STUDENT'S 2011-2012 APPLICATION SHOULD BE TURNED IN AT ONE TIME. APPLICATIONS AND FEES WILL BE ACCEPTED BEGINNING DECEMBER 1, 2010.**

**PRE-ENROLLMENT INFORMATION MEETING FOR 2011-2012 SCHOOL YEAR:** Scheduled to be held in the Student Activity Center on January 20, 2011 at 6:30 p.m.

**SCREENING:** Grades 2-8 - February 9, 2011 at 1:30 pm (sign ups on Pre-enrollment Information Night, in the Student Activity Center, January 20, 2011).

First Graders screened by appointment on February 10, 2011. (sign ups in the Student Activity Center, January 20, 2011)

Kindergarten children are screened by appointment the week of March 7-10, 2011. (sign ups in the Kindergarten Room the Pre-enrollment Information Night, January 20, 2011)

**ADMISSIONS:** Registration opens in November. Parishioners of Madonna del Sasso will be considered first if registration is completed by the end of January. Transfer students (applying for grades 2 - 8) will be screened in February. Screening for First Grade and Kindergarten applicants will be scheduled individually in February and March. Applications received at times other than the regular registration periods will be considered on the basis of space available. To qualify for the parishioner tuition rate, parents must meet three conditions:

- ◇ registration in the parish for at least one (1) year; and
- ◇ some visible effort to participate in the religious formation of their child(ren) at church and school; and
- ◇ support of the parish on a regular basis through the use of the envelope program. Status will be reviewed annually through parish records.

Madonna del Sasso School does not discriminate on the basis of race, color, national and/or ethnic origin, or gender in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs. Applications received at other than normal registration periods will be considered on the basis of space available. Race, sex, national origin will not be determining factors in the process.

**ACCREDITATION:** In keeping with our highest standards of academic excellence, in 2005 the school once again received the highest term of accreditation from the Western Association of Schools and Colleges (WASC) and the Western Catholic Educational Association (WCEA) in recognition of our outstanding educational program. Our experienced and credentialed faculty, the majority of who hold advanced degrees, is dedicated to implementing a rigorous curriculum while nurturing the potential of every child.

**MISSION:** The mission of Madonna del Sasso Parish School is to motivate, instruct and nurture children in the beliefs, practices and values of the Catholic community integrated with the highest standards of academic excellence, physical development and leadership skills to become lifelong learners inspired by Jesus Christ.

# MADONNA DEL SASSO SCHOOL



**PHILOSOPHY:** Madonna del Sasso Parish School is a Catholic environment where students can experience a maturing relationship with God, themselves and others. Together with parents, the primary educators, we prepare students to become involved, responsible and contributing members of the church and society. Under the inspiration and leadership of Jesus Christ, the master teacher, we create an institution of learning and living where a family of families can grow, share and experience a love for learning and Christian fellowship.

**CURRICULUM:** The Principles of Christianity are taught daily as part of our curriculum. Each student is afforded the opportunity to grow in the knowledge of Christ through study of scripture, participation in the liturgy, prayer, and finally an understanding that our study is a "way of life" -not just an exercise in learning. Basic competencies are set for each grade level based on the Diocesan Curriculum Guidelines. The Curriculum includes the following subjects: Religion; Math; Science; Reading/Literature; English Grammar; Spelling; Physical Education; Art; Computer Technology.

**CALENDAR:** Madonna del Sasso School is on the traditional school-year calendar. The school year usually starts the second to last week of August and ends the second week of June, with school vacations at Christmas and Easter.

**CLASS SIZE:** Enrollment is 30 in Kindergarten, 32 in first with a maximum of 35 in each grade from second through eighth. Grades K-5 have instructional assistants and the middle school in grades 6-8 is departmentalized by subject.

## SCHOOL DAY

### Kindergarten

OPENING 8:15-8:25  
RECESS 10:00-10:20  
DISMISSAL 12:00

### Grades 1-8

OPENING 8:15-8:25  
RECESS 10:00-10:20  
LUNCH 11:55-12:40  
DISMISSAL 3:00

On **Minimum Days**, every student is required to leave the school grounds immediately at 12:30 p.m., or report to the School extension.

**UNIFORMS:** Uniforms are required in grades K-8.

## Test Scores: Composite Results Iowa Basic Skills - Fall 2010 Percentile Rank of Average SS: National Student Norms

Total Reading	71	72	78	74	66	75	63
Total Language	53	80	82	86	69	77	75
Total Math	50	70	70	68	46	53	65
Composite	60	79	78	73	64	70	69

**FINANCIAL AID:** Limited financial aid is available for assistance in cases of need. Requests for aid are processed through Private School Aid Service in early April. Forms (made available for MDS applicants only) may be obtained through the school office in January. Funds are distributed at the recommendation of that agency. Requests must be renewed yearly.

**EXTENSION PROGRAM:** Madonna's School Extension Program serves parents of our school by caring for their children Monday through Friday during non-school hours (7:00 a.m. to 6:00 p.m.). Opportunity for study, organized play time, and continuation of Christian living principles are a part of the regular schedule. The system of payment at the Madonna Extension calls for purchase of service in hourly or monthly increments. This is a **pay in advance** requirement.



## NEEDED TO COMPLETE (K-8) REGISTRATION

- Completed Application Form**
- Most recent Picture attached to Application Form**
- Copy of most recent Report Card**  
(entering grades 1-8)
- Most recent Standardized Testing Scores**  
(entering grades 3-8)
- Letter of Recommendation (entering grades 1-8)**  
(This letter should be from the teacher or principal who knows your child both socially and academically)
- Birth Certificate**  
(entering K-8)
- Baptismal Certificate**  
(entering K-2)
- Updated Immunization Records : K-8**  
Kindergarten students receiving an acceptance letter will be required to submit an updated record after their school physical and any needed immunizations given. This must be done prior to the first day of school. (Please see "Immunizations Required..." sheet included in this packet)
- Processing and Screening Fee**  
**(\$50.00 non-refundable)**
- Applications received after June 17, 2011**  
**(\$100.00 non-refundable)**

# MADONNA DEL SASSO SCHOOL



PLEASE  
PLACE  
PICTURE  
HERE

DATE OF APPLICATION \_\_\_\_\_  
REGISTRATION FEE \_\_\_\_\_ PAID \_\_\_\_\_ CK # \_\_\_\_\_ CASH  
ENTERING GRADE \_\_\_\_\_  
AGE OF CHILD \_\_\_\_\_

## STUDENT INFORMATION

CHILD'S NAME \_\_\_\_\_ SEX \_\_\_\_\_  
Last First Middle

HOME ADDRESS \_\_\_\_\_  
Street & Number City Zip Code

TELEPHONE( ) \_\_\_\_\_ Religion \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

### PLEASE CHECK ALL THAT APPLY TO THE CHILD:

Ethnic Background	Living with	Language spoken at home	Parental Information
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Both Parents	<input type="checkbox"/> English	Father: <input type="checkbox"/> Married
<input type="checkbox"/> White	<input type="checkbox"/> Father	<input type="checkbox"/> Spanish	<input type="checkbox"/> Single
<input type="checkbox"/> Black	<input type="checkbox"/> Mother	<input type="checkbox"/> Other _____	<input type="checkbox"/> Divorced
<input type="checkbox"/> Asian	<input type="checkbox"/> Shared custody		<input type="checkbox"/> Remarried
<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Legal Guardian	<b>Student's spoken language</b>	<input type="checkbox"/> Deceased
<input type="checkbox"/> American Indian		<input type="checkbox"/> English	
<input type="checkbox"/> Native Alaskan		<input type="checkbox"/> Spanish	Mother: <input type="checkbox"/> Married
		<input type="checkbox"/> Other _____	<input type="checkbox"/> Single
<b>Citizenship</b>			<input type="checkbox"/> Divorced
<input type="checkbox"/> Citizen			
<input type="checkbox"/> Non-U.S. Citizen (specify) _____			
<input type="checkbox"/> Student Visa <input type="checkbox"/> yes <input type="checkbox"/> no			

SCHOOL CURRENTLY ATTENDING: \_\_\_\_\_  
Name of School

Address & Number \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

SCHOOL DISTRICT \_\_\_\_\_

# MADONNA DEL SASSO SCHOOL



## FAMILY RECORD

FATHER'S NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street & Number City State Zip

HOME PHONE\_\_( ) \_\_\_\_\_ BUSINESS PHONE\_\_( ) \_\_\_\_\_

OCCUPATION \_\_\_\_\_  
Name of Business Type of Work

BUSINESS ADDRESS \_\_\_\_\_  
Street & Number City State Zip

BIRTHPLACE \_\_\_\_\_ RELIGION \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street & Number City State Zip

HOME PHONE\_\_( ) \_\_\_\_\_ BUSINESS PHONE\_\_( ) \_\_\_\_\_

OCCUPATION \_\_\_\_\_  
Name of Business Type of Work

BUSINESS ADDRESS \_\_\_\_\_  
Street & Number City State Zip

BIRTHPLACE \_\_\_\_\_ RELIGION \_\_\_\_\_

## IF CHILD IS NOT LIVING WITH PARENT(S)

GUARDIAN'S NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street & Number City State Zip

HOME PHONE\_\_( ) \_\_\_\_\_ BUSINESS PHONE\_\_( ) \_\_\_\_\_

OCCUPATION \_\_\_\_\_  
Name of Business Type of Work

BUSINESS ADDRESS \_\_\_\_\_  
Street & Number City State Zip

RELATIONSHIP TO CHILD \_\_\_\_\_ BIRTHPLACE \_\_\_\_\_

# MADONNA DEL SASSO SCHOOL



RELIGION \_\_\_\_\_

PLACE OF WORSHIP:  
LEAST ONE YEAR)

REGISTERED \_\_\_ YES \_\_\_ NO (USING ENVELOPES PROVIDED BY CHURCH FOR AT

NAME OF CHURCH \_\_\_\_\_

CITY/STATE \_\_\_\_\_

BAPTISM \_\_\_\_\_

Church

City/State

Date

CHILD'S SPECIAL

HEALTH/MEDICAL/EMOTIONAL CONCERNS: \_\_\_\_\_

\_\_\_\_\_

HAS CHILD RECEIVED SPECIAL TESTING? \_\_\_ YES \_\_\_ NO IF YES, EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HAS CHILD BEEN RETAINED? \_\_\_ YES \_\_\_ NO IF YES, WHAT GRADE(S)? \_\_\_\_\_

HAS CHILD BEEN ADVANCED? \_\_\_ YES \_\_\_ NO IF YES, WHAT GRADE(S)? \_\_\_\_\_

CHILD'S SPECIAL TALENTS OR AREAS OF INTEREST: \_\_\_\_\_

\_\_\_\_\_

WHY WOULD YOU LIKE YOUR CHILD TO GO TO MDS SCHOOL?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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OTHER FAMILY MEMBERS WHO HAVE ATTENDED THE SCHOOL:

NAME: \_\_\_\_\_ GRADES: \_\_\_\_\_ YEARS: \_\_\_\_\_

NAME: \_\_\_\_\_ GRADES: \_\_\_\_\_ YEARS: \_\_\_\_\_

NAME: \_\_\_\_\_ GRADES: \_\_\_\_\_ YEARS: \_\_\_\_\_



**NEEDED TO COMPLETE  
REGISTRATION FOR PRESCHOOL**

- Completed application**
- Child's most recent picture attached to the application form**
- Copy of birth certificate**
- Application fee of \$25.00 (non-refundable)**
- Application fee of \$50.00 after June 17, 2011 (non-refundable)**



## PRESCHOOL

### **Pre-enrollment Information Meeting:**

The Pre-enrollment information meeting is scheduled in the Student Activity Center on January 20, 2010 at 6:30 pm.

### **Admission Policy:**

Madonna del Sasso Preschool is a Catholic school dedicated to the education of those who:

1. Desire to learn more about God and are willing to participate in the faith community
2. Support the philosophy, goals, objectives, and rules of the school
3. will be three by the start of the school year
4. are fully potty trained

Madonna Sasso Preschool and the Diocese of Monterey do not discriminate on the basis of race, sex, or national origin.

### **Calendar:**

Madonna del Sasso Preschool is on the traditional school year calendar. The school year usually starts the last week of August and ends the second week of June, with school vacations at Christmas and Easter.

### **School Day:**

The Preschool day begins at 8:15 am and ends at 11:45 am.

### **Parent Involvement:**

Each family is required to provide a minimum of 25 service hours per year. The hours are tallied beginning the first day of summer vacation up to and including the last day of school. Assistance in time, material or travel which benefits MDS School may be counted toward parent involvement. Families will be assessed \$30.00 per hour not completed by the last day of school.

### **Uniforms:**

Uniforms are not required at Madonna del Sasso Preschool. We ask that the children come to school in comfortable, washable play clothes.

# MADONNA DEL SASSO SCHOOL



PLEASE  
PLACE  
PICTURE  
HERE

## PRESCHOOL APPLICATION

DATE OF APPLICATION \_\_\_\_\_  
PROCESSING FEE \_\_\_\_\_ PAID \_\_\_\_\_ CK # \_\_\_\_\_ CASH  
AGE OF CHILD \_\_\_\_\_

### STUDENT INFORMATION

CHILD'S NAME \_\_\_\_\_ SEX \_\_\_\_\_  
Last First Middle

HOME ADDRESS \_\_\_\_\_  
Street & Number City Zip Code

TELEPHONE( ) \_\_\_\_\_ Religion \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

### PLEASE CHECK ALL THAT APPLY TO THE CHILD:

<b>Ethnic Background:</b>	<b>Living With:</b>	<b>Language Spoken at Home:</b>	<b>Parental Information:</b>
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Both Parents	<input type="checkbox"/> English	<b>Father:</b>
<input type="checkbox"/> White	<input type="checkbox"/> Father	<input type="checkbox"/> Spanish	<input type="checkbox"/> Married
<input type="checkbox"/> Black	<input type="checkbox"/> Mother	<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Single
<input type="checkbox"/> Asian (specify) _____	<input type="checkbox"/> Legal Guardian		<input type="checkbox"/> Separated
<input type="checkbox"/> _____	<input type="checkbox"/> Foster Parent		<input type="checkbox"/> Remarried
<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Shared Custody	<b>Student's Spoken Language (s)</b>	<input type="checkbox"/> Divorced
<input type="checkbox"/> American Indian	<input type="checkbox"/> Other _____	<input type="checkbox"/> English	<input type="checkbox"/> Deceased
<input type="checkbox"/> Alaskan Native		<input type="checkbox"/> Spanish	<b>Mother:</b>
<input type="checkbox"/> Other Non-White		<input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Married
<b>Citizenship:</b>			<input type="checkbox"/> Single
<input type="checkbox"/> U. S. Citizen			<input type="checkbox"/> Separated
<input type="checkbox"/> Non-U.S. Citizen (specify) _____			<input type="checkbox"/> Remarried
<input type="checkbox"/> Student Visa <input type="checkbox"/> yes <input type="checkbox"/> no			<input type="checkbox"/> Divorced
			<input type="checkbox"/> Deceased

**CLASS THAT YOU ARE APPLYING FOR:**  
**TIMES: 8:15 AM –11:45 AM**

**CHECK ONE**  
TWO DAY CLASS \_\_\_\_\_ (TUESDAY, THURSDAY)  
THREE DAY CLASS \_\_\_\_\_ (MONDAY, WEDNESDAY, FRIDAY)  
FIVE DAY CLASS \_\_\_\_\_ (MONDAY-FRIDAY)

# MADONNA DEL SASSO SCHOOL



## FAMILY RECORD

FATHER'S NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street & Number City State Zip

HOME PHONE ( ) \_\_\_\_\_ BUSINESS PHONE ( ) \_\_\_\_\_

OCCUPATION \_\_\_\_\_  
Name of Business Type of Work

BUSINESS ADDRESS \_\_\_\_\_  
Street & Number City State Zip

BIRTHPLACE \_\_\_\_\_ RELIGION \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street & Number City State Zip

HOME PHONE ( ) \_\_\_\_\_ BUSINESS PHONE ( ) \_\_\_\_\_

OCCUPATION \_\_\_\_\_  
Name of Business Type of Work

BUSINESS ADDRESS \_\_\_\_\_  
Street & Number City State Zip

BIRTHPLACE \_\_\_\_\_ RELIGION \_\_\_\_\_

## IF CHILD IS NOT LIVING WITH PARENT(S)

GUARDIAN'S NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street & Number City State Zip

HOME PHONE ( ) \_\_\_\_\_ BUSINESS PHONE ( ) \_\_\_\_\_

OCCUPATION \_\_\_\_\_  
Name of Business Type of Work

BUSINESS ADDRESS \_\_\_\_\_  
Street & Number City State Zip

RELATIONSHIP TO CHILD \_\_\_\_\_ BIRTHPLACE \_\_\_\_\_

# MADONNA DEL SASSO SCHOOL



RELIGION \_\_\_\_\_

PLACE OF WORSHIP:  
FOR AT LEAST ONE YEAR)

REGISTERED \_\_\_ YES \_\_\_ NO (USING ENVELOPES PROVIDED BY THE CHURCH

NAME OF CHURCH \_\_\_\_\_

CITY/STATE \_\_\_\_\_

BAPTISM \_\_\_\_\_

Church \_\_\_\_\_

City/State \_\_\_\_\_

Date \_\_\_\_\_

CHILD'S SPECIAL HEALTH/MEDICAL/EMOTIONAL  
CONCERNS: \_\_\_\_\_

\_\_\_\_\_

HAS CHILD RECEIVED SPECIAL TESTING? \_\_\_ YES \_\_\_ NO IF YES, EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SCHOOL CURRENTLY ATTENDING: \_\_\_\_\_

Name of School

Address & Number \_\_\_\_\_

City/State \_\_\_\_\_

Zip Code \_\_\_\_\_

WHY WOULD YOU LIKE YOUR CHILD TO GO TO MADONNA DEL SASSO PRESCHOOL?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_