



STN: \_\_\_\_\_

## 2020-2021 Application for Enrollment

Student's Full Legal Name: \_\_\_\_\_  
*First Middle Last*

Date of Birth: \_\_\_\_\_ Gender: M F Catholic: Y N

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
*Street City Zip*

Grade: \_\_\_\_\_ Preschool:  3-Day  5-Day

School District: Barker Coolspring Edgewood Joy Knapp Lake Hills LaPorte Marsh Niemann Pine

Last School Attended: \_\_\_\_\_ City: \_\_\_\_\_

### Parent/Guardian #1

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Relationship to Student:  Mother  Father  Guardian

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
*Street City Zip*

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Catholic: Y N Completed VIRTUS Training: Y N Name of Church You Attend: \_\_\_\_\_

### Parent/Guardian #2

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Relationship to Student:  Mother  Father  Guardian

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
*Street City Zip*

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Catholic: Y N Completed VIRTUS Training: Y N Name of Church You Attend: \_\_\_\_\_

### Emergency Information:

Medical Problems/Conditions/Allergies: \_\_\_\_\_ \*Also inform the classroom teacher

Emergency Contact #1: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact #2: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**All information provided on this form is true and complete to the best of my knowledge.**

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_



## 2020-2021 St. Stanislaus Kostka Scholarship Application

Family Name: \_\_\_\_\_

Number of St. Stanislaus K-8 Students: \_\_\_\_ Number of St. Stanislaus Preschool Students: \_\_\_\_

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Programs and scholarships for which you are applying (*see attached descriptions*):

- |   |  |
|---|--|
| <input type="checkbox"/> Parish Scholarship   | <input type="checkbox"/> Employee Discount |
| <input type="checkbox"/> Indiana CHOICE Scholarship   | <input type="checkbox"/> Saints in Need    |
| <input type="checkbox"/> SGO  | <input type="checkbox"/> Other: _____      |
| <input type="checkbox"/> Teacher Scholarship  |  |
| <input type="checkbox"/> Principal Scholarship ( <i>If you are not applying for/participating in CHOICE, Diocesan Tuition Assistance, or SGO, you must fill out a FACTS form online at <a href="https://online.factsmgmt.com/signin/3XVNX">https://online.factsmgmt.com/signin/3XVNX</a>; the application fee for FACTS is \$35</i> ) |  |

List the areas in which you volunteer at St. Stanislaus Kostka School/Parish:

\_\_\_\_\_  
\_\_\_\_\_

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Initial each item below to indicate your agreement to the terms of this application:

*I certify that all information stated on this application is true to the best of my knowledge; I understand that lack of full disclosure can result loss of scholarship and a requirement that received monies be repaid.*

*I understand I am applying for a partial scholarship only and that the remaining tuition costs are my responsibility.*

*I understand that I am required to participate in fundraising and community activities at St. Stanislaus Kostka School/Parish.*

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



## **2020-2021 Tuition Policy**

St. Stanislaus Kostka Catholic School is committed to providing a quality education that strives to meet our mission statement. In addition, St. Stanislaus Kostka School/Parish is committed to ensuring that every family has access to an affordable Catholic education for their children. Accordingly, St. Stanislaus Kostka Parish subsidizes the School's annual budget through Parish donations.

### **Tuition**

The tuition cost to attend St. Stanislaus Kostka Catholic School is as follows:

- \$5,775 per school year, per K-8 student, less any awarded Tuition Assistance
- \$3,200 per 5-day preschool student (discounts and scholarships do not apply)
- \$2,300 per 3-day preschool student (discounts and scholarships do not apply)

Tuition includes the technology fee, books, and all fees for attending the School with the exception of individual field trips, Scrip non-usage fee if applicable, After Care, Lunch, missing or damaged books and/or iPads (see iPad Responsible Use Policy).

St. Stanislaus tuition rates listed above apply to all students enrolled in Preschool through Eighth Grade. Each family signs a written Tuition Payment Contract that details the policies and the payment terms that are available.

### **Registration Fees**

- Early Registration: \$50 per student, maximum of \$150 per family
- Regular Registration (after May 1, 2020): \$80 per student, maximum of \$240 per family

Please note that Registration Fees are non-refundable.

### **Tuition Assistance Programs**

There are a variety of financial aid, scholarships, and fundraising programs available to offset some of the tuition cost. Many of our families qualify for some type of assistance.

Tuition Assistance is available for Kindergarten through Eighth Grade students only. The following pages detail the programs that are available.

**SCRIP Program** — *All St. Stanislaus families are required to participate in the SCRIP program as outlined in the school's Tuition Payment Contract.*

SCRIP are gift certificates and pre-paid cards that are used just like cash; however, when you purchase SCRIP, a percentage of the amount is given as revenue to the School **and** credits your family's tuition account. You can use SCRIP to purchase everyday items like food, clothing, and other essentials. A list of participating stores is available at [www.saintstans.com/scrip](http://www.saintstans.com/scrip)

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### **Third-Party Assistance Programs**

*The following programs are need-based and administered by organizations outside of St. Stanislaus School/Parish:*

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#### **Diocesan Tuition Assistance Program**

This annual program provides approximately \$500,000 for tuition assistance to Catholic students of the Diocese of Gary. This is an assistance program and as such it does not provide full coverage of tuition costs.

The program is based on family income, number of dependents, and any extenuating circumstances. To be eligible, you must:

- Be a practicing Catholic family
- Be registered members of a parish in the Diocese of Gary
- Have student(s) in grades K-12 (preschool students are not eligible)

If you meet the above eligibility guidelines, you are encouraged to apply. Please note that student(s) who receive an Indiana CHOICE scholarship are not eligible for the diocesan program.

Applications are ONLY available online, through FACTS Grant & Aid Assessment, at <https://online.factsmgmt.com/aid> There is a \$35 application fee. FACTS is an independent third-party that conducts financial aid analysis to determine a family's financial need and assist in the determination of how funds are to be allocated.

Please note that new families, late applications, and appeals must wait for the initial awards to be distributed before the application process reopens in June 2019.

#### **The State of Indiana CHOICE Scholarship**

This is Indiana's school-choice "voucher" program. Students who meet the existing admissions requirements for St. Stanislaus Kostka and the eligibility requirements defined by the state, may be eligible for a School Choice Scholarship. More information is available at <https://www.doe.in.gov/choice>

## **Scholarship Granting Organization (SGO)**

SGO provides scholarships to low and middle income families who are seeking alternatives to public education through tuition-based schools. SGO Scholarships are not funded by the state, but instead by charitable donations.

This particular fund is made available through donations from businesses and individuals to Sagamore Institute, thus the amount of money available varies.

Eligible students must meet established income guidelines which are calculated using the Federal Free & Reduced Lunch scales.

The School Office will assist qualifying families in completing the SGO application.

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## **Parish & School-Based Programs**

*Each year, we designate funds from the School Operational Budget or Parish donations to be used for tuition assistance in the form of both need-based and merit-based aid. We encourage you to explore these options for your family.*

### **Parish Scholarship**

This scholarship is available to active parishioner families of St. Stanislaus Kostka Parish. As the parish provides a significant subsidy to keep tuition affordable for parish families, eligibility requirements are as follows:

- Must be practicing Catholics
- Must be active in St. Stanislaus Kostka Parish

Please note that parishioner status is determined by the Pastor, not the School. Status must be documented by letter from St. Stanislaus Kostka Parish.

### **Saints in Need**

The Hardship Fund has been established by St. Stanislaus Kostka Parish to provide financial support to St. Stanislaus students who are experiencing financial hardship due to a catastrophic even or unexpected financial challenges.

The fund is comprised of charitable donations voluntarily provided by St. Stanislaus Parish organizations, or by persons who want to assist St. Stanislaus students who are facing such hardships. Because the fund is comprised of donations, we cannot guarantee that funds will be available at a given time.

To be eligible to receive a reward from the Hardship Fund, an individual must:

- Be a student of St. Stanislaus Kostka School
- Have a funding need due to extreme misfortune for reasons beyond his or her control that prevents the student's family from meeting their tuition obligation. Examples of such events include, but are not limited to:
  - Death of a parent
  - Unusual, uninsured medical expenses
  - Uninsured losses caused by fire, crime, flood, or other disasters
  - Loss of employment

The maximum award amount is \$1,000 per catastrophic event, subject to the availability of the funds and the extent of need. A student's family may receive a maximum of one award per academic school year.

This fund is not associated with the financial aid application process; applicants must complete the Review of Financial Hardship form, available from the School Office.

### **Employee Discount**

Tuition discounts are offered for employees of St. Stanislaus Kostka School who have children in Kindergarten through Eighth Grade. This is not a need-based discount and is applied as follows:

- Full-time faculty: 50% discount beginning on the first day of employment
- Non-teaching employees: prorated discount up to 25%, based on the number of scheduled annual work hours; begins the first day of employment

### **Principal Scholarship**

All new or returning students with financial need (as determined by FACTS) are eligible for this scholarship. Please note that this scholarship does not provide full tuition assistance.

Eligibility is as follows:

- New or returning student
- Returning students must also exhibit active participation in the Parish and/or School
- Demonstration of financial need (as determined by FACTS; see below)

Applicants must apply online at <https://online.factsmgt.com/aid> unless financial need has already been determined by participation in the CHOICE, SGO, or Diocesan Assistance programs. There is a \$35 application fee for FACTS, an independent third-party that conducts financial aid analysis to determine a family's financial need. We receive a confidential report that outlines the financial situation based on information obtained in the application and supporting tax documents. The analysis completed by FACTS serves as a recommendation only.

**Teacher Scholarship**

This scholarship is funded through teacher-sponsored fundraising activities and direct donations; it is awarded to families who actively volunteer and support the School and/or Parish. A list of activities for which you have volunteered must be provided on the attached St. Stanislaus Kostka Scholarship Application form.



## Authorization for Release of School Records

This form will be submitted to the school where your child's educational records are on file. To assist in the prompt and efficient transfer of these records, please provide the following information:

Previous School: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last Grade Attended: \_\_\_\_\_

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I hereby authorize release of the above-named child's official permanent record, including all academic, medical, social, psychological, and testing information.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Please send all documents to:

St. Stanislaus Kostka Catholic School  
1506 Washington Street  
Michigan City, IN 46360

Phone: (219) 872-2258

Fax: (219) 872-2295





## 2020-2021 Authorization to Release Records to Indiana CHIRP

I, \_\_\_\_\_, give St. Stanislaus Kostka Catholic School permission to release the following information concerning my child, \_\_\_\_\_, to the Indiana State Department of Health's Children and Hoosiers Immunization Registry Program (CHIRP):

- Student's name
- Immunization data
- Date of birth
- Other identifying information as applicable

I understand that the information in the registry may be used to verify that my child has received proper immunizations and to inform me or my child of my child's immunization status or that an immunization is due according to recommended immunization schedules.

I understand that my child's information will be available to the immunization data registry of another state, a healthcare provider, a local health department, elementary or secondary school that is attended by the individual, a child care center, the office of Medicaid policy and planning, or contractor of the office of Medicaid policy and planning. I also understand that other entities may be added to the list through amendment to Indiana Code 16-39-5-3.

I hereby consent to the release of such information.

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Child's Name

\_\_\_\_\_  
Grade Level



## 2020-2021 Student Pick-Up Release Form

To ensure your child's safety, please indicate who has permission to pick up your child during the school day. Only the people listed below will be allowed to pick up your child:

Child's Name	Grade	Teacher
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Please initial below if giving your child(ren) permission to walk home on foot:**

The above named students have my permission to leave St. Stanislaus Kostka School and walk to \_\_\_\_\_. I understand that once they leave the school they are no longer the responsibility of St. Stanislaus Kostka Catholic School.

The following individuals have permission to pick up my child(ren) from St. Stanislaus Kostka School:

Name	Relation to Student	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date