



# Cathedral of the Annunciation School

1110 N. Lincoln Street  
Stockton, California 95203

Phone: (209) 444-4000  
Fax: (209) 444-4013

**THANK YOU FOR YOUR INTEREST IN CATHEDRAL OF THE ANNUNCIATION SCHOOL**

## Kindergarten Student Information for Fall of 2019

Full name: \_\_\_\_\_  
(Last) (First) (Middle)

Nickname: \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Sibling(s) enrolled here? \_\_\_\_\_

Date of birth: \_\_\_\_\_ (Child must be five years of age on or before September 1)

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

Religion practiced: \_\_\_\_\_ Baptism: Parish \_\_\_\_\_ Date: \_\_\_\_\_

### Family Information

Father

Mother

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_ Middle and Maiden name: \_\_\_\_\_

Street address: \_\_\_\_\_

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

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Place of birth: \_\_\_\_\_

US Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

Years in Stockton area: \_\_\_\_\_

Name (while attending) if parent is an alumnus of Annunciation School: \_\_\_\_\_

Occupation: \_\_\_\_\_

Company/Location: \_\_\_\_\_

With whom does your child primarily reside?  Both parents  Father  Mother  Guardian

*Please check if pertinent:*  Father deceased  Parents separated  Parents divorced  
 Mother deceased  Father remarried  Mother remarried

*Are you members of the cathedral?* \_\_\_\_\_ since: \_\_\_\_\_ Sunday offering envelope # \_\_\_\_\_

*Siblings not enrolled:*

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ School: \_\_\_\_\_

*For purposes of statistic surveys only – please check one or more.*

Ethnicity/Race:  Hispanic or Latino  American Indian or Alaskan Native  Asian  Middle Eastern  
 Anglican/Caucasian  Black or African American  Native Hawaiian or Other Pacific Islander

### **Please Answer Following Questions**

**What are your elementary educational goals for your child?**

---

---

---

---

---

**What is your understanding of “fully entering into a teaching partnership with the faculty”?**

---

---

---

---

---

**How does your family practice your faith?**

---

---

---

---

---

# Information and Checklist

**COMPLETED APPLICATION AND ALL ACCOMPANYING DOCUMENTATION LISTED BELOW ARE DUE BY FEBRUARY 22, 2019**

**OPEN HOUSE WILL BE JANUARY 27 (10AM-1PM) AND JANUARY 31 (6PM)**

**NOTIFICATION OF ACCEPTANCE WILL OCCUR BY THE END OF MARCH 2019  
upon which a \$150 registration fee per student is required  
testing for readiness may be required**

Please use the checklist below to ensure the registration process will be completed without delay. For this application to be considered valid, all information requested must be submitted. Incomplete applications will **not** be processed. Please feel free to call the school office: (209) 444-4000, if you have any questions.

**Required copies:**

- Birth certificate     Baptismal certificate     Completed application form
- Health immunization card     Parental duties and obligations agreement
- Copy of latest preschool assessment     Photograph of your family (informal snapshot)
- Completed school readiness worksheet     \$75.00 Processing fee (per family)

*How did you learn about out open enrollment period?*

- School parent (name) \_\_\_\_\_
- Staff member (name) \_\_\_\_\_
- Parish bulletin     Media     Website     Other \_\_\_\_\_

**When a child is accepted into Annunciation School, we expect that families support our community by:**

- Entering fully into a teaching and religious formation partnership with faculty.
- Attending Sunday and Holy Day Masses as a family, if Catholic, and honoring family time.
- Participating in the sacramental preparation of your children.
- Meeting annual fundraising obligations of Fall Festival, Crab Feed, and Big Raffle.
- Reading and abiding by the policies in the *Parent-Student Handbook*.
- Holding your children responsible for abiding by the school's code of conduct.

*By signing this application, you are making a pledge with the school to uphold these responsibilities.*

Mother's signature: \_\_\_\_\_ Father's signature: \_\_\_\_\_  
Date: \_\_\_\_\_ Date: \_\_\_\_\_

**Both parents must sign this application for it to be processed. If both signatures are not present, an explanation for this omission must accompany this application.**

\*\*\*\*\*

**For Office Use**

Application & fee received date: \_\_\_\_\_ Check# \_\_\_\_\_

School accept. date: \_\_\_\_\_

Family accept: Yes \_\_\_\_ No \_\_\_\_

Date: \_\_\_\_\_