

A Member of the Diocese of Syracuse System of Catholic Schools
Catholic Schools of Broome County Application For New Admission 2016/2017
 ---Please Print---

Applying for new admission to (circle): SETON / ALL SAINTS / ST JOHN / ST JAMES SCHOOL Date Entering: _____

Family Last Name _____ Address _____

City _____ State _____ Zip _____

Religion _____ Parish _____

Student(s)/Children Applying to Catholic Schools:

Name _____ School _____ Grade _____ DOB _____ M / F

Name _____ School _____ Grade _____ DOB _____ M / F

Name _____ School _____ Grade _____ DOB _____ M / F

Name _____ School _____ Grade _____ DOB _____ M / F

Name _____ School _____ Grade _____ DOB _____ M / F

Student lives with Both Parents Mother Father Other (please specify) _____

Parental Information:

Tuition Billing Address - mail to: _____

E-mail address _____

Note: Both parents have a right to school information regarding the student unless one parent presents a legal document that does not permit this.

Mother's Information: Mother/Guardian's Name _____ Religion _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Mother/Guardian's Occupation _____ Employer's Name _____

Father's Information: Father/Guardian's Name _____ Religion _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Father/Guardian's Occupation _____ Employer's Name _____

Person Responsible for Payment of Tuition – must complete items 1 and 2 in order to apply. (Please Print)

1) Name _____ Address _____ City/State _____ Zip _____

Home Phone _____ Cell Phone _____ Employer's Name _____

Work Phone _____

2) It is agreed that tuition will be paid as indicated above. **Signature** of person responsible for tuition: _____

FOR OFFICE USE ONLY: Tuition Deposit Received: _____ Check #/Cash: _____ Date: _____

2016/2017 Tuition Charge _____ Student # _____

If Student is Catholic, please complete the following:

Baptism First Penance First Eucharist Confirmation

Date _____ _____ _____ _____

Church _____ _____ _____ _____

Public School District in which the student resides _____ **Bus Transportation** ____ Yes ____ No

Current School or Pre-School _____ **Grade** _____

Reason for Leaving _____

Custody: This school assumes that both parents have full parental and residential custody. If this is not the case, it is the responsibility of the parents to provide the school with that portion of the divorce decree or separation agreement that articulates parental and residential custody. Should any changes occur during the year, please inform the school.

_____ **Please check here if the school should expect a custody document.**

Ethnic background of student (optional) _____

This information is used to complete the New York State Basic Educational Data Systems report that all public and non-public schools are required to submit.

Academic Information:

_____ Unofficial copies of transcripts and reports have been requested or are attached for admission purposes. Acceptances are not final until records have been reviewed by the principal.

Does the student have a Behavioral Intervention Plan? ____ Yes ____ No. If yes, what are the terms of that plan? Please provide the school with a copy of that plan. Please specify below:

Does the student require any particular accommodations to facilitate his or her participation in the educational program offered by the school, other than what has been indicated in the question above? ____ Yes ____ No. If yes, what are those accommodations? Please specify below.

Has the student ever been tested for learning problems? ____ Yes ____ No.

Has testing for leaning problems ever been suggested? ____ Yes ____ No.

Does the student have an IEP or IESP? ____ Yes ____ No.

Does the student have a 504 Accommodation Plan? ____ Yes ____ No.

Please authorize copies of these documents to be sent to the School.

Is the student currently taking medications? ____ Yes ____ No. If so, please specify: _____

Does the medication need to be administered during the school day? ____ Yes ____ No. If so, when? _____

Emergency Contacts

Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Financial Information									
<u>AFFILIATED RATES</u>					<u>NON-AFFILIATED RATES</u>				
Affiliated Rate: The affiliated rate applies to families who are registered members of a Roman Catholic Parish. All affiliations are verified with the Pastor of the Church designated on the enrollment form.					Non-Affiliated Rate: The non-affiliated rate applies to families who are NOT registered members of a Roman Catholic Parish.				
MONTHLY TUITION RATES ARE BASED ON A 10 MONTH SCHOOL YEAR									
Grade	1st Child	2nd Child	3rd Child		Grade	1st Child	2nd Child	3rd Child	
Kindergarten	\$ 452	\$ 430	\$ 407		Kindergarten	\$ 504	\$ 479	\$ 453	
1 - 3	\$ 492	\$ 467	\$ 442		1 - 3	\$ 544	\$ 517	\$ 490	
4 - 6	\$ 495	\$ 470	\$ 446		4 - 6	\$ 548	\$ 521	\$ 493	
7 - 8	\$ 499	\$ 475	\$ 450		7 - 8	\$ 552	\$ 525	\$ 497	
High School	\$ 682	\$ 648	\$ 614		High School	\$ 734	\$ 697	\$ 660	

Tuition Policy - 2016-2017 Academic Year

Smart Tuition:

The Catholic Schools of Broome County (CSBC) has contracted with Smart Tuition to act as the tuition administrator for our school system. All current families, families not enrolled previously and families with a student transferring to another building (with no prior history of admission) are required to complete the Smart Tuition Enrollment Agreement online each school year.

Payment Plans:

Payments may be made by check, telephone, web or automatic debit from your bank account or credit card. There are three choices of payment plans:

- Plan A 1 Payment (August) (No administrative fee)
- Plan B 11 Payments (July – May)
- Plan C 4 Payments (July, October, January & April)

Discounts and Credits:

Credits such as SCRIP and tuition assistance and discounts will be noted on your monthly statement and the amount due will be reduced by the amount of the credit(s).

Fees:

- A \$39 administrative fee applies to Plans B and C
- A 2.65% fee applies to all credit/debit card payments.
- A late fee of \$45 will be charged for each late payment.
- A fee of \$30 will be applied to your account for each failed auto-debit and each failed check payment. (Please note that your financial institution may also charge you a fee.)

Hardships:

CSBC understands that from time to time unexpected hardships occur. We encourage families experiencing hardships to immediately contact the tuition officer to discuss financial options. All special arrangements are subject to the approval of the CSBC President. The following options may be available:

- An education loan through Your Tuition Solution.
- A Promissory Note with Affidavit for Confession of Judgment.
- In some unique hardship situations, temporary financial assistance may be available.

Delinquent Accounts:

An account is delinquent if a payment has not been made by the due date. A late fee of \$45 will be charged for each payment that has not been made by the due date. Unless other arrangements have been made with CSBC, the following will result for delinquent accounts:

For accounts 60 days past due:

- Access to Rediker’s ParentPlus and StudentPlus Portals will be suspended.
- Report cards and transcripts will be withheld.
- Student(s) may not participate in extracurricular activities, including athletics.

For accounts 90 days past due:

- Student(s) will be withdrawn.
- Account will be turned over to a collection agency.

Students may not apply for a future school year unless their account is current.

Seniors must pay all balances in full in order to participate in graduation, receive their diploma and have transcripts and other documents released from the school.

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Any family whose account was delinquent more than 60 days, at any time in the prior year, must enroll in the automatic payment plan.

Any family whose payment is returned or denied a second time during the school year must submit subsequent payments by Cashier's Check or the automatic payment plan only.

Pro-rated Tuition and Scholarship:

Tuition and any scholarship received will be pro-rated for students entering school after September 30th.

A Student who withdraws or is dismissed from school will be charged tuition for the remainder of the month the student leaves school. CSBC will not release transcripts or other student records until all balances have been paid.

If a student is asked to leave from the CSBC, for any reason, all financial aid awarded for the current school year will be forfeited. If actual tuition payments received by CSBC for the student exceeds the amount of tuition due for the period the student was enrolled in school, the difference will be refunded.

I/We have read the tuition and payment policy of the school. I/We are responsible to make tuition and fee payments for the student whose name is on this application, less any financial aid granted for the 2016/2017 school year.

I/We understand that the school must be informed of any physical, mental or emotional limitation known by the parents that could affect appropriate placement. Providing inaccurate or incomplete information during the application process will result in non-acceptance or dismissal from the school. Classroom placement is determined by the school.

I/We understand that the *Student Handbook* contains the official policies and procedures of the school.

Mother/Guardian's Signature

Date

Father/Guardian's Signature

Date

Complete the section below only if someone other than a parent will be responsible for the student's tuition.

Name(s) of the person(s) responsible for tuition if ***other*** than a parent _____

Name _____ Home Phone _____

Address _____

Employer _____ Work Phone _____ Cell Phone _____

I have read the tuition and payment policy of the school. I am responsible to make tuition payments for the student whose name is on this application, less any financial aid granted, for the 2016/2017 school year according to the option selected above.

Signature of Person(s) Responsible for Tuition

Printed Name(s)

Date

This school is fully committed to fostering an educational community that is free from discrimination based on race, national origin, skin color, disabilities, age or gender, except as concerns any matter for which there is a statutory or judicially recognized exception for religious institutions.