

# *Immaculate Conception Academy*

A Future Cristo Rey Network School

## **APPLICATION FOR ADMISSION – 2009-2010**

### Application Check List:

- |  |  |
|--|--|
| ___ Application Form                                     | ___ Recent Student Photo   |
| ___ 7th Grade Report Card                                | ___ 8 <sup>th</sup> Grade Report Card<br>(For Transfer Students: Report cards from the previous 2 years) |
| ___ Student Essay  | ___ Parent Essay   |
| ___ Copies of Baptism/Communion/Confirmation Certificate |  |
| ___ Parent(s) 2007 Federal Tax return                    | ___ Non-refundable \$50.00 Application Fee   |

Please mail or bring completed application to:

ICA  
Attn: Gina Espinal-Aguerre  
3625 – 24<sup>th</sup> Street  
San Francisco, CA 94110

FOR OFFICE USE:

Application received on: \_\_\_\_\_ Application Fee: \_\_\_\_\_ Cash: \_\_\_\_\_ / Check: \_\_\_\_\_ Received by: \_\_\_\_\_

Approved: \_\_\_\_\_ Interview Set: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Interviewer: \_\_\_\_\_



415.824.2052  
[www.icacademy.org](http://www.icacademy.org)

MEMBER OF THE  
**CRISTO REY NETWORK**®

# APPLICATION FORM

Please type or print

APPLYING FOR GRADE:

9(Freshman) \_\_\_\_\_ 10(Sophomore) \_\_\_\_\_ 11(Junior) \_\_\_\_\_

Student's Name \_\_\_\_\_  
Last First Middle Social Security Number

Home Address \_\_\_\_\_  
Number & Street City State Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month Day Year City/State/Country

Student's Email Address \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

U.S. Citizen Yes \_\_\_ No \_\_\_ If not a U.S. Citizen, type of visa or classification \_\_\_\_\_

Religion \_\_\_\_\_ Parish/Church \_\_\_\_\_

Sacraments Received:

Baptism: \_\_\_\_\_  
Date Place  
Holy Communion: \_\_\_\_\_  
Date Place  
Confirmation: \_\_\_\_\_  
Date Place

**OFFICE USE:**

\_\_\_\_\_  
Verified  
\_\_\_\_\_  
Verified  
\_\_\_\_\_  
Verified

## SCHOOL HISTORY (Start with most recent)

	<u>Name of School</u>	<u>Address-City/State/Zip</u>	<u>Phone</u>	<u>Grades Attended</u>	<u>Years</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

**PARENT/GUARDIAN INFORMATION**

**Mother's Legal Name** (last, first, middle) \_\_\_\_\_

Mother's Email Address \_\_\_\_\_ Mother's cell \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Father's Legal Name** (last, first, middle) \_\_\_\_\_

Father's Email Address \_\_\_\_\_ Father's cell \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Applicant lives with (check all that apply)**

- |                                   |                                     |
|-----------------------------------|-------------------------------------|
| _____ Both parents                | _____ Grandparent                   |
| _____ Mother only                 | _____ Guardian                      |
| _____ Father only                 | _____ Stepmother (father remarried) |
| _____ Mother/Father joint custody | _____ Stepfather (mother remarried) |

**LEGAL GUARDIAN (If not living with parent)**

Name (last, first, middle) \_\_\_\_\_ Relationship: \_\_\_\_\_

Email Address \_\_\_\_\_ Cell \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Full legal responsibility for this applicant is with (check all that apply)**

- |   |                      |
|---|----------------------|
| _____ Both parents                        | _____ Grandparent(s) |
| _____ Mother only                         | _____ Guardian       |
| _____ Father only                         | _____ Stepmother     |
| _____ Mother/Father shared responsibility | _____ Stepfather     |

**HOUSEHOLD INFORMATION**

Number of individuals who reside in your household:

\_\_\_\_ Parents/Guardians      \_\_\_\_ Children      \_\_\_\_ Other, Relationship: \_\_\_\_\_

**SIBLINGS**

	<u>Name</u>	<u>Age</u>	<u>School Attending</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

**ETHNIC BACKGROUND** (Check appropriate spaces)

Applicant

_____ Native American/Alaskan	_____ Chinese	_____ Japanese
_____ Native Haw/Pac Island	_____ Filipino	_____ Other Asian
_____ African American	_____ Hispanic	_____ White
_____ Multi Racial		

Primary Language(s) spoken at home \_\_\_\_\_

Language(s) applicant reads and writes \_\_\_\_\_

If members of the family are currently enrolled or have graduated from ICA please list them here:

Name	Grad Year	Relationship
_____	_____	_____
_____	_____	_____

The **High School Placement Test** is required of all 9<sup>th</sup> grade applicants. HSPT is to be taken only once at any of the Catholic High Schools.

I WILL TAKE THE HIGH SCHOOL PLACEMENT TEST AT:

ICA\_\_\_\_(January 10, 2009 at 8:30 a.m.) OTHER (specify where & when)\_\_\_\_\_

Has the applicant had an educational assessment by a Learning Specialist, and/or an IEP?

\_\_\_\_\_ No \_\_\_\_\_ Yes If yes, Date(s) \_\_\_\_\_

Please note: Students with documented learning disabilities may be eligible for extended time testing. Please enclose proper documentation with this application. You will be contacted by our Admissions Dept.

**Applicant Statement** On a separate sheet please respond to the following:

**Three (3) things I want ICA to know about me; include your main interests!**

**What are your reasons for attending ICA?**

**Parent Statement** Please attach a separate sheet and indicate in writing:

**Why you are interested in having your daughter attend Immaculate Conception Academy?**

**PARENT AUTHORIZATION FOR RELEASE OF RECORDS/RECOMMENDATIONS**

I hereby give my consent to Immaculate Conception Academy to obtain all pertinent educational records about my daughter, including transcripts, standardized test scores and recommendations. This signature also authorizes release of high school placement test scores to the student's elementary school.

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

Date\_\_\_\_\_

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

Date\_\_\_\_\_

