



Phone (330) 262-8671
Fax (330) 262-0967
515 Beall Avenue
Wooster, Ohio 44691

February 2, 2022

Dear Parent,

I would personally invite you to consider St. Mary School for your child's further education. I'm thrilled to share the many wonderful opportunities available to prospective St. Mary School families. Please feel free to schedule your school tour and classroom visitation by contacting me personally.

Saint Mary School is a parish school operated within the Cleveland Catholic Diocesan School System. Nearly one hundred forty students in grades PreK-8 attend St. Mary School. Our faculty continues to be committed to a superior level of professional development. Many of our faculty members have Masters or Doctoral Degrees. Paraprofessionals support teachers and assist students in grades K-3.

Our school mission statement is "Growing in Character, Faith, and Knowledge". In our quest to facilitate student growth in character we participate in service projects. To establish a strong faith, the school community celebrates Mass weekly. To advance student knowledge, we offer high quality instruction across all subject areas. Our students display outstanding achievement in academic excellence. Students are encouraged to participate in Diocese-wide competitions for Science, Writing, Technology, Engineering, Math, and Public Speaking. We received the Thomas Edison Science Award for STEM Education and student research.

In addition, we offer a wide range of "extras" including Academic Challenge, Art Club, Choir, Drama Club, Enrichment, Extended Day Program, "Pop-up" Clubs addressing student interests, Social Justice Club, and sports. Speech therapy, tutoring services, and school psychological services are available for those students in need of specific accommodations.

Please also visit our school website, www.stmwoo.org, for more information.

Thank you for your time and consideration.

Sincerely,

Mrs. Laura Marvin
Principal

REGISTRATIONS for placement in ST. MARY SCHOOL Fall 2022/2023 Class, are being accepted at St. Mary School Office on school days from 8:00a.m. -3:30 p.m.

Parents, you will need to have the following items with you on the day you complete your child's application:

- Your child's birth certificate
- Your child's Social Security card
- Your child's baptismal certificate
- When applicable, information regarding legal custody

There is a \$50.00 Registration Fee payable at the time you apply.

If you have questions, or for more information, please call the School Office at (330)262-8671.



St. Mary of the Immaculate Conception School

Tuition Worksheet for 2022/2023 School Year

Every student in St. Mary of the Immaculate Conception School is eligible to apply for scholarships and financial aid. Working in partnership with parents, who are the primary educators of their children, St. Mary Catholic School wants to ensure that young people in our school community have an opportunity to receive an affordable Catholic education. Please apply for scholarships and financial aid using this worksheet. Once you have completed the form, please return it to the school office for processing. Families will receive the necessary application forms once we receive your request. Families will be notified of scholarship and financial aid awards as soon as possible.

FAMILY NAME (please print) _____

Please list student(s) and Grade(s) K-8:

Tuition per Student: \$5500.00 (Actual per pupil cost \$9790.00)

Student Fees per student: \$225.00 Note: All families are responsible for paying student fees

Please indicate which scholarships and/or financial aid options you are applying for by placing a checkmark in front of the appropriate option(s):

_____ **1. I am NOT applying for a scholarship or financial aid at this time.**

_____ **2. Parish Member Scholarship** – \$1900.00 scholarship for one student
OR

_____ **3. Parish Multi-Child Scholarship** – scholarship: \$2800.00 for 2nd student, \$3650.00 for 3rd student

By selecting either option 1 or 2, parents are indicating that their family is registered as members of St. Mary of the Immaculate Conception Parish and regularly participate in the life of the parish through various parish events including regular attendance at Mass as determined at the parish's discretion and as evidenced by the use of offertory envelopes, whether or not a donation is included.

_____ **4. Community Member Scholarship** – scholarship: \$1150.00 for 2nd student, \$2000.00 for 3rd student

By applying for this scholarship, parents are indicating that their family is not registered members of St. Mary of the Immaculate Conception Parish, but are active in the life of St. Mary School community, including attending and assisting at school events and activities.

_____ **5. EdChoice Expansion Scholarship (State of Ohio)**

This state voucher program provides qualifying students (family income at or below 200% of poverty level) the opportunity to attend participating private schools. Applications will be available on February 1 and are due no later than March 1 to allow time for your information to be processed. Applications are processed in the order they are received. Families awarded the EdChoice Scholarship are not eligible for other scholarships or financial aid.

_____ **6. Diocese and/or Parish Financial Needs-Based Assistance**

Application is completed online through FACTS. The FACTS Grant and Aid Assessment instruction sheet detailing the process will be sent to you. There is a fee per family to apply. The application deadline is March 1. The same application will be used by St. Mary Parish/School to assess assistance at through our Guardian Angel Fund. Awards for needs-based financial assistance will be made to eligible families no later than July 1.

_____ **7. Jon Peterson Special Needs Scholarship**

Application available through ODE to students with special needs who have an Individualized Education Program through their district. Parent is responsible for applying, obtaining funds, and signing them over to the school.

Parent/Guardian Signature

Date

2022/2023 INFORMATION REGARDING LEGAL CUSTODY

To be completed as part of the registration/re-registration agreement



Parent/s, residential parent/guardian:

Name: _____

Address: _____

Phone: _____

Child/ren & Grade: _____

- Child lives with:**
- _____ both natural parents
 - _____ natural mother, step/adoptive father
 - _____ natural father, step/adoptive mother
 - _____ only mother
 - _____ only father
 - _____ grandparents (with legal custody)
 - _____ other relative (with legal custody) – relationship _____
 - _____ other – explain _____

Is there a court order (or pending order) affecting the custody and/or residency of the child/ren?
_____ YES _____ NO

Please provide a certified copy of the entire court order including the case number and those sections referring to visitation rights and contacts with the school. Also include the page bearing the judge's signature and court seal. This copy should include any and all modifications made as of the date of registration of the child in this school. It is also the responsibility of the parents to inform the principal of any subsequent modifications during the child's tenure at the school.

Non-residential parent:

Name: _____

Address: _____

Phone: _____

Does the non-residential parent have visitation rights? _____ YES _____ NO

Is there a court decision that states that the non-residential parent should NOT receive school information or attend school activities? _____ YES _____ NO

Is the non-residential parent responsible for paying tuition? _____ YES _____ NO

Office of Catholic Education - Diocese of Cleveland - Permanent Record Card



Date Entered:			
School Name:	Student Full Name:	Student ID#:	Gender:
School City:	Student Birthdate:	Birthplace (City, St., Country)	Class of:

Student Residential Address	City	County	Zip	Phone	Student Parish/City	Language Spoken at Home

Name of School Student Entered From	School City	School State	Type of School		Entering Grade
			<input type="checkbox"/> Parochial	<input type="checkbox"/> Public <input type="checkbox"/> Home School <input type="checkbox"/> Other _____	

Existing Educational Support	Public School District of Residence	Name of Public School in Student Area	Miles to School
<input type="checkbox"/> IEP <input type="checkbox"/> Accommodation Plan			

Ethnicity							
<input type="checkbox"/> Native American	<input type="checkbox"/> Asian	<input type="checkbox"/> African American/Black	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Native Hawaiian/Pacific Islands	<input type="checkbox"/> White	<input type="checkbox"/> Two or More Races	<input type="checkbox"/> Unknown/Other
<input type="checkbox"/> Do Not Wish to Disclose							

Sacraments	Date	Church, City, State
Baptism		
First Communion		
Confirmation		

Student Lives With	Last Name	First Name	Email Address	Occupation	Employer	Best Contact Number
<input type="checkbox"/> Natural Mother						
<input type="checkbox"/> Natural Father						
<input type="checkbox"/> Custodial M						
<input type="checkbox"/> Custodial F						
<input type="checkbox"/> Legal Guardian/Other						
<input type="checkbox"/> Parenting Plan/Custody Plan - Copy of plan needs to be provided to the school						

Parents/Custodial Parents	Religion	Parent Status
<input type="checkbox"/> Natural Mother		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed <input type="checkbox"/> Deceased
<input type="checkbox"/> Natural Father		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed <input type="checkbox"/> Deceased
<input type="checkbox"/> Custodial M		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed <input type="checkbox"/> Deceased
<input type="checkbox"/> Custodial F		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed <input type="checkbox"/> Deceased
<input type="checkbox"/> Legal Guardian/Other		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Remarried <input type="checkbox"/> Widowed <input type="checkbox"/> Deceased

Other Children in the Household/List Names & Birthdates				
1.	2.	3.	4.	5.



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Has your child had (privately or through preschool/school):		
Speech Therapy	Yes	No
Occupational Therapy	Yes	No
Physical Therapy	Yes	No
Early Intervention Services	Yes	No
Does your child have an IEP or Service Plan	Yes	No

Which public school district do you reside in:
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ST. MARY'S SCHOOL
515 BEALL AVENUE
WOOSTER, OHIO 44691
330-262-8671

Date: _____

To: _____ School

_____ Address

Please send the cumulative folder, including health records, and a teacher's assessment for:

Student's Name: _____

Student's Name: _____

Student's Name: _____

All records and any additional information, including special classes and I.E.P.s, should be mailed to the following address:

St. Mary's School
Mrs. Laura Marvin, Principal
515 Beall Avenue
Wooster, Ohio 44691

Thank you very much!

_____ Parent/s Signature _____ Date

