



Application for Admission

St. Katharine Drexel Catholic School

Academic Excellence
Personal Discipline
Christian Service



AMERICA'S FIRST CATHOLIC SCHOOLS



Saint Katharine Drexel Catholic School

1053 Holland Road ~ Holland PA ~ 18966

(215) 357-4720~ www.skdschool.org

Registration Information

At St. Katharine Drexel Catholic School, we take pride in the education experience offered to our students. Our staff is committed to guiding and supporting you through the Admissions Process. All Applications for Admission must be submitted with all of the necessary paperwork listed below. Without the following documentation, an application will be considered incomplete and will not be reviewed.

- **A copy of your child's State Birth Certificate**
First Grade: child must be 6 years of age on or before August 31 2021
Kindergarten: child must be 5 years of age on or before August 31 2021
Pre-K 4: child must be 4 years of age on or before August 31 2021 and fully toilet trained.
Pre-K 3: child must be 3 years of age on or before August 31 2021 and fully toilet trained.
- **An original Baptismal Certificate at the time of registration**
- **All sacramental information**
Completed dates and names of churches for Reconciliation, Eucharist, and confirmation must be provided on application with copies of certificate – if applicable.
- **Application Fee**
A \$100 non-refundable application fee is required per family.
- **Current Immunization Record Signed by a Doctor**
A copy of the immunization record must be included per state law before a child can begin attending classes.
- **Health History Form**
A health history form completed by a parent must also be included with your immunization record. This form is included in your registration packet.
- **If Divorced or Separated**
A copy of the court order pertaining to custody (if applicable) or a note from a parent explaining custody arrangements must be provided.
- **Test Results**
Testing results for any student being registered (psychological, physical, educational, disability, etc.) must be provided.

Questions?

Alicia Figueroa

Director of Advancement

[215-357-4720](tel:215-357-4720) - extension 4

advancement@skdschool.org



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Embracing Leadership, Love, & Legacy

Student Information

First Name: _____ Last Name: _____ M.I.: _____

Date of Birth: _____ Current Grade: _____ Applying for Grade: _____

Home Address: _____ City, State, Zip Code: _____

Previous School: _____ School District: _____

Reason for Leaving: _____

Race/Nationality: _____ Prefer Not to Answer SSN: _____

Parish Information

Name of Parish: _____

Date of Baptism: _____ Name of Church: _____

Address of Church: _____ City, ST, Zip: _____

Date of Reconciliation: _____ Name of Church: _____

Address of Church: _____ City, ST, Zip: _____

Date of Holy Eucharist: _____ Name of Church: _____

Address of Church: _____ City, ST, Zip: _____

Date of Confirmation: _____ Name of Church: _____

Address of Church: _____ City, ST, Zip: _____

Parent/Guardian Information

Father's Information

Name: _____
Address: _____
City, ST, Zip: _____
Religion: _____
Country of Birth: _____
Home Phone: _____
Cell Phone: _____
Email Address: _____
Employer: _____
Employer Phone: _____

Mother's Information

Name: (Maiden) _____
Address: _____
City, ST, Zip: _____
Religion: _____
Country of Birth: _____
Home Phone: _____
Cell Phone: _____
Email Address: _____
Employer: _____
Employer Phone: _____

Marital Status: Married Separated Divorced Widowed Single

Child lives with: Both Mother Father Other/Guardian

If divorced or separated, please attach a copy of court order. A court issued custody agreement **must be on file in the school office.*

Emergency Information

Medical Allergies:

Emergency Contact 1:

Relation

Primary Phone #:

Cell Phone #:

Emergency Contact 1:

Relation

Primary Phone #:

Cell Phone #:

Doctor's Name:

Hospital of Choice:

Doctor Phone:

Doctor Address:

Registration Checklist

Registration will not be complete without copies of all documents on file and \$100 non-refundable registration fee.

- Birth Certificate Current Immunization Records Dentist Report
 Baptismal Certificate Physician's form CRSD Health Form

Other Important Documentation we'll Need:

- Bussing Form (If applicable) Tuition Forms Potty Training Form Parish Verification Letter (If applicable)



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