

# St. Vincent de Paul Catholic School

4980 St. Vincent Drive  
 Mobile, AL 36619  
 (251) 666-8022



## Registration Directions

The following requirements **must** be met before acceptance is final:

- ✓ All outstanding tuition and fees from the previous year must be completely paid.
- ✓ Completed registration form with registration fee.
- ✓ For new parents / students, a meeting with the principal is mandatory.
- ✓ Full payment of all fees by required deadlines.
- ✓ Kindergarten and new students must show proof of the second measles shot required after their 5<sup>th</sup> birthday.
- ✓ Each 6<sup>th</sup> grader is required to get a dose of Tdap vaccine.
- ✓ Original birth certificate with state seal.
- ✓ Signed tuition agreement, fees policy, and the tuition preference form.
- ✓ Baptismal certificate (if Catholic).
- ✓ Social Security Card.
- ✓ Current immunization card (IMM50).
- ✓ All records from previous schools sent from the school directly to St. Vincent de Paul Catholic School.
- ✓ Subsidy letter from home parish if not SVDP (letter for your Pastor can be picked up in the SVS office).
- ✓ Copy of any student educational evaluations submitted to St. Vincent de Paul Catholic School.
- ✓ If applicable, divorce decree and custody paperwork.

### **PK3, PK4, and K Age & Developmental Requirements:**

- Students entering PK3 must be 3 years old by September 10<sup>th</sup>.
- PK4 students must be 4 years old by September 10<sup>th</sup>.
- Students entering K must be 5 years old by September 10<sup>th</sup>.
- All students **MUST** be potty-trained.

### **St. Vincent de Paul Fee and Tuition Schedule:**

Registration Fee	Early Bird: \$75 on or before March 15 <sup>th</sup>	\$100 <b>by</b> May 1 <sup>st</sup> \$125 <b>after</b> May 1 <sup>st</sup>
Academic Supply Fee	\$110 <i>due by May 1<sup>st</sup></i> \$110 <i>due by June 1<sup>st</sup></i>	\$220
Archdiocesan Fee	<i>due by June 1<sup>st</sup></i>	\$35
PTO Dues <b>** Per Family</b>	<i>due by June 1<sup>st</sup></i>	\$15

\*\*\*All fees are non-refundable.

\*\*\*Textbook lists and vendors will be sent home once finalized.

Grades: Kindergarten – 5 <sup>th</sup>	Contributor / Tithing Tuition	Non-Contributor / Non-Catholic Tuition
One Child	\$3292	\$4866
Two or More Children	\$5085	\$7371

\* The contributor / tithing rate is granted to a family who is a registered member of a parish and contributes the minimum required contribution of \$1000 in an identifiable manner (envelope / checks) and their parish agrees to subsidize their students. If you are a member of St. Vincent de Paul Parish, \$500 is due to the church by June 1<sup>st</sup> and the remaining \$500 is due to the church by December 1<sup>st</sup>. Tithing rates are checked on December 1<sup>st</sup> and tuition is adjusted accordingly.

Grades: PK3 and PK4	Tuition	Payment Plan Options
Each child	\$4057	<ul style="list-style-type: none"> <li>• <u>Full tuition payment</u> due on June 1, 2019 to receive \$100 discount. Payment will be paid directly to the school. No FACTS fee will be assessed.</li> </ul>
		<ul style="list-style-type: none"> <li>• <u>Full tuition payment</u> due on July 1, 2019. Payment will be paid directly to the school. No FACTS fee will be assessed.</li> </ul>
		<ul style="list-style-type: none"> <li>• <u>Ten monthly payments through FACTS:</u> Parents elect to pay tuition on either the 5<sup>th</sup> or the 20<sup>th</sup> of the month through a FACTS payment plan. This is an automatic payment plan made through your checking or savings account. The FACTS annual enrollment fee is \$52 and should be paid directly to the school. The 1<sup>st</sup> payment month is July. Tuition payments are divided into ten monthly payments.</li> </ul>
		<ul style="list-style-type: none"> <li>• <u>Credit Card payments through FACTS.</u> Parents may pay monthly using Master Card, Discover, or American Express. In addition to the FACTS fee of \$52, there will be a convenience fee for each payment. The convenience fee is 2.85% per \$100 of tuition.</li> </ul>

**Tuition Assistance Options:**

- The Patrons of Charity Fund and our SVDP Parish provide a limited amount of tuition assistance for SVDP parishioners.
  - Step One: Complete the Grant & Aid Assessment at [www.factsmgmt.com](http://www.factsmgmt.com).
  - Step Two: Obtain, complete, and return the Tuition Assistance Assessment (available in the school office).
  - Step Three: Make an appointment with Father Vrazel.
- Alabama Opportunity Scholarship Fund
  - <https://alabamascholarshipfund.org/>

**Immunization Statement:**

Beginning with the 2018 – 2019 school year, all students enrolled in the Archdiocese of Mobile’s PreK – 12 Catholic schools, daycare centers and Mother’s Day Out programs were required to be immunized. Students must supply the school with evidence of immunization from the Alabama Department of Health.

A student may be exempt from immunization for medical reasons if the student presents the school with a medical exemption card from the Alabama Department of Health.

*As has been indicated by the Vatican Pontifical Academy for Life, Catholics may be immunized. When it is a question of protecting the whole population and avoiding death and malformation in others, this becomes more important than an individual student’s objection to abstaining from vaccines developed from abortions that might have occurred decades ago. Catholics are responsible for the common good. Until such time that the Vatican were to alter this position, the Archdiocese of Mobile does not accept a religious objection to immunization based upon Catholic teachings.*

## Registration Form

**Date of Application:** \_\_\_\_\_

**Grade Entering:** \_\_\_\_\_

### **Student Information Data:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

Place of Birth (City, State): \_\_\_\_\_ Gender: Female Male

Race/National Origin:

- American Indian or Alaskan Native       Asian       Black or African American  
 Native Hawaiian or Other Pacific Islander       White       Two or More Races

Ethnicity:  Hispanic  Non Hispanic

Religion: \_\_\_\_\_ Present Parish: \_\_\_\_\_

### **Parent/Family Information:**

Check one:  Father     Stepfather     Guardian

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email (Please print clearly): \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father's Religion: \_\_\_\_\_

Check one:  Mother     Stepmother     Guardian

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email (Please print clearly): \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother's Religion: \_\_\_\_\_

Student currently lives with:

- Father     Mother     Stepfather     Stepmother     Grandmother     Grandfather     Guardian

If parents are divorced, who has primary custody? \_\_\_\_\_

Current divorce/custody paperwork on file in office? \_\_\_\_\_

Primary language spoken at home: \_\_\_\_\_

**School Information:**

Public School Zone: \_\_\_\_\_

Schools Attended (List most current first):

School	Grade(s) Attended	Location
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has your child ever been suspended or expelled? Yes No

Has your child been retained? Yes No If yes, what grade? \_\_\_\_\_

Has your child ever been diagnosed with the following:

- A Learning Disability
- Attention Deficit Disorder
- Central Auditory Processing Disorder
- Is there documentation to verify a diagnosis?

Has your child ever been prescribed medication for any of the above mentioned disorders? Yes No

Has your child ever had an IEP (Individualized Education Plan)? Yes No

Has your child ever enrolled in special classes? Yes No

Does your child have any special needs / disabilities? Please explain.

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**Student Sacramental History:**

Baptismal Date (MM/DD/YY): \_\_\_\_\_ Parish/Church: \_\_\_\_\_

First Reconciliation Date (MM/DD/YY): \_\_\_\_\_ Parish/Church: \_\_\_\_\_

First Communion Date (MM/DD/YY): \_\_\_\_\_ Parish/Church: \_\_\_\_\_

Are you an Alumnus of St. Vincent de Paul? Yes No What years did you attend?: \_\_\_\_\_

Other children in the family, please list:

Name	Age	School
_____	_____	_____
_____	_____	_____
_____	_____	_____

**I certify that all responses given on this application are true and complete. I understand that the falsification and/or omission of fact may result in denial of admission or removal of student from St. Vincent de Paul Catholic School.**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Health Form

## St. Vincent de Paul Catholic School

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Physician Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Health Insurance Company: \_\_\_\_\_ Hospital Preference: \_\_\_\_\_  
 Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

Medical History	Yes	No	Remarks
Fainting Spells			
Epilepsy			
Diabetes			
Allergies			
Serious Illness/Injuries			
Other			
Other			

Prescription Medication (Please list all prescribed medications taken daily)	Directions/Prescribed for what condition?

### Emergency Information

Father/Guardian Home Phone# \_\_\_\_\_ Mother/Guardian Home Phone # \_\_\_\_\_  
 Father/Guardian Work Phone# \_\_\_\_\_ Mother/Guardian Work Phone# \_\_\_\_\_  
 Father/Guardian Pager \_\_\_\_\_ Mother/Guardian Pager \_\_\_\_\_  
 Father/Guardian Cell Phone# \_\_\_\_\_ Mother/Guardian Cell Phone# \_\_\_\_\_

In case of an emergency, if parent/guardian is not available, please notify:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone# \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone# \_\_\_\_\_

In the event of illness or accident and the unavailability of the above named physician, I consent to the treatment of \_\_\_\_\_ (*student name*) by a physician, selected by school officials or those persons conducting or assisting in any school related function or activity, or hospital emergency room personnel. This consent shall remain in full force and effect so long as \_\_\_\_\_ (*student name*) is a student at St. Vincent de Paul School unless notice or revocation is given in writing to the Principal of the school.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Authorization of Step-Parent or Other Adult:**

Please list the name, address, and phone number of step-parent or other adults, and name of biological parent for whom the step-parent or other adult is acting.

Adult: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Adult's phone number: \_\_\_\_\_

Address of Adult: \_\_\_\_\_

Biological Parent for whom this adult may be acting in place of:

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please list the name, address, and phone number of step-parent or other adults, and name of biological parent for whom the step-parent or other adult is acting.

Adult: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Adult's phone number: \_\_\_\_\_

Address of Adult: \_\_\_\_\_

Biological Parent for whom this adult may be acting in place of:

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\* A current copy of divorce decree and/or other legal court orders must be on file in the school office.\***

# St. Vincent de Paul Catholic School

Child's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

## Parental 'Permission' Requirements

Under the provisions of the Family Educational Rights and Privacy Act of 1974, and as amended, you have the right to withhold release of any or all of the information listed below. The situations listed below, if yes is selected, information / video / picture may be released for any purpose with your consent at the discretion of St. Vincent de Paul Catholic School.

I give permission for my child to:

- Photographed and/or videotaped, and/or mentioned in an article about the school submitted and published by Parents Magazine, The Catholic Week, posted on the school web site, etc. used for promotional purposes Yes No
- Use the Internet as guided by the school's usage policy. I understand any violation of this policy by my child may result in appropriate actions. Yes No
- Use a name, address, phone number, and or email address to be published in any St. Vincent de Paul Catholic School Student Directory. Yes No
- I give St. Vincent de Paul Catholic School permission to release mailing information to McGill-Toolen Catholic High School. Yes No

Parent Name: \_\_\_\_\_

Student Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

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

### **Non-refundable Registration Fee is due with this form:**

**\$75 for new and existing families by March 15<sup>th</sup>**

**\$100 by April 1<sup>st</sup>**

**\$125 after April 1<sup>st</sup>**

## **Tuition Payment Plan**

Please choose a payment plan and return this form with the registration packet.

\_\_\_\_\_ Parish Contributor with subsidy

\_\_\_\_\_ Non-contributor without subsidy

Who will be responsible for tuition payments? \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ Social Security #: \_\_\_\_\_

### **Please Select Preferred Tuition Plan for the 2019-20 School Year**

\_\_\_\_\_ Total payment due to school on or before June 1<sup>st</sup> to receive \$100 discount.

\_\_\_\_\_ Total payment due to school on or before July 1<sup>st</sup>.

\_\_\_\_\_ 10 monthly payments beginning in July through the FACTS payment plan. This is an automatic payment plan made through your checking or savings account. There is a \$52 annual enrollment fee that should be paid directly to the school.

\_\_\_\_\_ 10 monthly payments on your MasterCard, Discover, or American Express credit card through the FACTS payment plan beginning in July. The \$52 annual fee still applies and a convenience fee of 2.85% per \$100 spent on tuition will also apply.

This pre-registration form is a planning form only. This is not a contract. Payment of registration fee and/or completion of this form does not guarantee acceptance. Only an official notification from the school confirms that the child has been accepted as a student at St. Vincent de Paul Catholic School.

Any disputes arising out of or relating to this Agreement, performance under this Agreement, or the breach thereof, including all disputes of any nature relating to my child's enrollment and attendance at this school, and including but not limited to the threshold questions of arbitrability and the formation of this arbitration agreement, shall be finally resolved by binding arbitration administered by the American Arbitration Association under its rules, and judgement upon the award rendered by the arbitrator may be entered in any court having jurisdiction. The arbitration shall be conducted in the English language in the city of Mobile., Alabama, applying the laws of the State of Alabama. There shall be one arbitrator who shall be selected in accordance with the procedures of the American Arbitration Association. Each party shall pay one half of the cost of the arbitrator. In no event shall punitive damages be awardable by the arbitrator in favor of either party, unless specifically authorized by applicable statute. This provision is continuing in nature and shall remain in force throughout the entire period of my child's enrollment at this school.

**BY MY SIGNATURE BELOW, I AGREE TO SEND ANY AND ALL DISPUTES RELATING TO THIS AGREEMENT, TO BINDING ARBITRATION. I ALSO HEREBY WAIVE MY RIGHT TO A JURY TRIAL IF A DISPUTE ARISES IN ANY WAY RELATING TO THIS AGREEMENT.**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **Non-Admission of Students Due to Tuition Delinquency**

School families failing to pay tuition according to the agreement which they have made with St. Vincent de Paul Catholic School or who have been unwilling to make suitable alternative arrangements with the school will be informed that they may incur all of the following penalties:

- If fees are not current by June 30<sup>th</sup>, the student will not be allowed to attend on the first day of school. The Office of Catholic Schools will be notified of the parents' delinquent financial status.
- If tuition is not current by August 1<sup>st</sup>, the student will not be allowed to attend on the first day of school. The Office of Catholic Schools will be notified of the parents' delinquent financial status.
- Parents will not be given a copy of their child's report card until all financial obligations have been met. The Office of Catholic Schools will be notified of the parents' delinquent financial status.
- No paperwork (transcripts, report cards, immunization cards, official testing reports, etc.) will be released until all financial obligations have been met.
- Eighth grade students will not have any transcripts, report cards, immunization cards, official testing reports, etc. forwarded to high schools until all financial obligations have been met.
- No student with outstanding financial obligations will be re-admitted to the school.
- The Office of Catholic Schools will be notified of the parents' delinquent financial status.

## **Delinquent Tuition From Previous Years**

Registration will not be accepted for the next school year until all debts are cleared from the current year. If tuition becomes delinquent after registration, your child will be considered conditional until all debts are cleared from the previous year. All previously unpaid tuition must be paid by May 31<sup>st</sup> if a student is to be re-admitted to St. Vincent de Paul or admitted to any Catholic School in the Mobile Archdiocese. Payment must be made directly to the school.

## **Tuition Refunds**

Families withdrawing their child prior to the 1<sup>st</sup> day of school shall be refunded the entire amount of tuition that has been paid for the upcoming year, minus the registration fee. In the event of withdrawal once school begins and before the school year is complete, tuition shall be owed to the school through the end of the month of withdrawal.

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I have read the above tuition and fee policy for St. Vincent de Paul Catholic School and consent to abide by the conditions of this agreement. Payment of registration fee and/or completion of this form does not guarantee acceptance. Only an official notification from the school confirms that the child has been accepted.

The person responsible for payment should sign below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

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