



23225 Lyons Avenue,
Santa Clarita, CA
661-259-1141 / Fax: 661-259-8254
www.olphsc.org

ADMISSION APPLICATION

GRADE TK K 1 2 3 4 5 6 7 8

Multiple student discount does not apply for TK program

Place small photo here

BIRTH DATE _____

Enrollment Year **2019-2020**

- CHECK LIST**
- A non-refundable APPLICATION/TESTING FEE of \$50 attached and payable to:
Our Lady of Perpetual Help School or O.L.P.H. School
 - Return a **copy** of your child's Birth Certificate with the application
 - Return a **copy** of your child's Baptismal Certificate with the application
 - Return a **copy** of your child's First Communion Certificate with the application
 - Return a **copy** of your child's Proof of Immunization with the application
 - Return a **copy** of your child's most current report card with the application
 - Return a **copy** of your child's most current Standardized Test scores with the application

STUDENT INFORMATION

First Middle Last

Male Female

Native American Filipino Other Asian Hispanic/Latino African American
 Caucasian/Other Multi

Catholic Yes No Parish currently attending _____

If not Catholic, what religion is practiced? _____

Home/Cell Phone _____

This number is used for Principal's phone blast

COMPLETE HOME ADDRESS (include zip code) _____

How did you hear about O.L.P.H. School?

Has a current school family referred you to O.L.P.H. School? _____

Name of referring family

OLPH MISSION STATEMENT

Our Lady of Perpetual Help Catholic School is a learning community dedicated to providing TK-8 students with the highest quality values-based education, integrating faith formation with a solid academic curriculum. With a caring faculty and strong parental involvement, OLPH seeks to actively guide and support each student's academic, spiritual and personal growth.

CURRENT SCHOOL

School Name _____

School Address _____

Phone w/area code _____ Fax w/area code _____

APPLICANT INFORMATION

Has your child been administered any diagnostic evaluations (educational or psychological) or have a current IEP, 504 or PSP?

(If yes, please attach a copy)

PARENTS' INFORMATION

Mother/Step-mother

Ms.

Mrs.

Dr.

First Middle Last Maiden

Occupation Cell Email

Catholic Yes No If not Catholic, what religion is practiced? _____

Father/Step-father

Mr.

Dr.

First Middle Last

Occupation Cell Email

Catholic Yes No If not Catholic, what religion is practiced? _____

Is applicant living with both parents? Yes No If not, with whom? _____

Are parents Married Separated Divorced Single Other

Who has legal custody? _____

(Please provide legal documentation if necessary)

SIBLINGS: Name and Age

SIGNATURE OF PARENT OR GUARDIAN

I understand and acknowledge that O.L.P.H. School may deny admission at any time if determined that enrollment of the child would not be appropriate. I understand and acknowledge that O.L.P.H. School may terminate enrollment at any time if it determines that continued enrollment would be inconsistent with the mission of O.L.P.H. School.

Signature of parent/guardian

Date of application

Before submitting your application, please see the checklist at the top of page one.

O.L.P.H. School does not discriminate in its admissions practices on the basis of race, gender, national origin or disability