



ST. RAYMOND CATHOLIC SCHOOL

12320 PARAMOUNT BLVD, DOWNEY, CA 90242

PHONE: (562) 862-3210

WWW.STRAYMONDSCHOOL-DOWNEY.ORG

Admissions Application

2020-2021

Revised 0622.2020

St. Raymond School Mission Statement

St. Raymond School is a faith-community founded on Catholic values as revealed through the Gospel message of Jesus Christ, the mission of the Church, and articulated through Schoolwide Learning Expectations. Each child receives a holistic education that begins at home with the parents as the primary educators and reinforced at school where we recognize students as unique and unrepeatable gifts of creation.

Thank you for choosing St. Raymond School for your child's educational setting. We commend you for your interest in Catholic Education, and we look forward to the opportunity to serve you and your child.

The fundamental goal of St. Raymond School is the building of a Faith Community where the promotion of the Gospel Message of Jesus, Catholic beliefs, values and doctrine are an integral part of the daily lived experience of our multi-cultural student body and parents.

Our philosophy of Catholic Education is dedicated to educating the whole person, emphasizing the dignity and spiritual development of each child. The total instructional curriculum, enriched by religious education, is intended to stimulate intellectual, spiritual, psychological, social and physical growth, thus enabling our students to become responsible citizens

STUDENT LIFE

St. Raymond Church is situated in the center of the school, both in physical placement and its influence on the education of our children. All students pray daily, plan and participate in regular school Liturgies, and have daily Religion classes. Active parent participation in the education of their children is an integral part of St. Raymond School.

Other programs include: California Junior Scholarship Federation, Academic Decathlon, After School Care, Hot Lunch, C.Y.O. Sports, Altar Servers, Yearbook, Choir, Drama, Student Council and Safety Patrol.

PARENTAL EXPECTATIONS

- Required participation in the Parent Teacher Organization (P.T.O.) and support of fundraisers and community events through attendance, volunteering and participation
- Prompt Payment of fees and tuition
- Support of all policies, procedures, guidelines and rules contained in the **Parent-Student Handbook**
- Active Parishioners – *Parental support of the religious instruction:*

Weekly attendance at Mass, regular use of the church envelopes, support of and participation in the sacramental program: Reconciliation and First Eucharist and active participation in parish activities

STUDENT EXPECTATIONS

Students are expected to:

- **Support** all policies, procedures, guidelines and rules as stated in the Parent-Student Handbook
- **Complete** the required course of study and related assignments in according to his/her ability
- **Master** the basic grade level requirements in academic areas to advance to the next grade

ADMISSIONS

Students are considered for admission after a review of the application, review of report card, school recommendations, entrance test results, and interview with the principal.

Priority for Admissions:

1. Active St. Raymond Church parishioners with siblings already enrolled in our school
2. Active St. Raymond Church parishioners
3. Active Catholic parishioners (other parishes)
4. All other Applicants

NON-DISCRIMINATION POLICY

St. Raymond School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at this school. The school does not discriminate based on race, color, national or ethnic origin in the administration of its education policies, admission policies, scholarship program, or other school-administered programs.

IMMUNIZATION AND HEALTH REGULATIONS

Students admitted at ages 4-6 years need these immunizations:

- [Diphtheria](#), [Tetanus](#), and [Pertussis](#) (DTaP, DTP, or DT) **5 doses**
(4 doses OK if one was given on or after 4th birthday)
- [Polio](#) (OPV or IPV) **4 doses**
(3 doses OK if one was given on or after 4th birthday)
- [Hepatitis B](#) **3 doses**
- [Measles](#), [Mumps](#), and [Rubella](#) (MMR) **2 doses**
(Both given on or after 1st birthday)
- [Varicella](#) (Chickenpox) **1 dose**

NOTE: Parents must show their child's Immunization Record as proof of immunization. These immunization requirements also apply to students entering [Transitional Kindergarten](#).

Students admitted at ages 7-17 years need these immunizations:

- [Diphtheria](#), [Tetanus](#), and [Pertussis](#) (DTaP, DTP, DT, Tdap, or Td) **4 doses**
(3 doses OK if last dose was given on or after 2nd birthday)
- [Polio](#) (OPV or IPV) **4 doses**
(3 doses OK if one was given on or after 2nd birthday)
- [Measles](#), [Mumps](#), and [Rubella](#) (MMR) **1 dose**
(2 doses required at 7th grade)
- [Varicella](#) (Chickenpox)
 - *Admission at ages 7-12 years need 1 dose*
 - *Admission at ages 13-17 years need 2 doses*
- [Tetanus](#), [Diphtheria](#), and [Pertussis](#) (Tdap) **1 dose**
at 7th grade or out-of-state transfer admission at 8th to 12th grades
 - *OR 1 dose on or after the 7th birthday*

PHYSICAL EXAMINATION REQUIREMENT

All students are required **by law** to have a physical examination within 18 months of entrance to Transitional-Kindergarten or Kindergarten. There is a health check-up form from the California Health Department that must be completed and signed by a physician (**CHDP form**). This is supplied by the school at the time of registration and must be on file in the school office. If a student is entering Grades 1-8, a copy of the form is required – ask your child's previous school to obtain a copy. If the previous school cannot provide a copy, then the student must have a new form completed and signed by a physician prior to entrance.

CURRICULUM

Basic Core Curriculum

- Religion
- Reading
- Mathematics
- Social Studies
- Science
- English
- Spelling
- Writing
- Language Arts

Programs of Enrichment

- Music
- Physical Education
- Art

Special Programs

- Computers
- Library Skills
- Field Trips
- Academic Decathlon
- Builders Club
- Student Government

DAILY SCHEDULE

- School begins at 7:50 AM for all grades TK-8
 - Recess schedule is as follows:
 - 9:50 – 10:05 AM Recess Grades 5-8
 - 10:05 – 10:20 AM Recess Grades 1-4
 - 9:50 – 10:20 AM Recess Kindergarten & TK
 - Lunch Schedule is as follows
 - **First Lunch**
 - 12:00 – 12:20 PM Lunch Grades TK, K, 5-8
 - 12:00 – 12:20 PM Play Grades 1-4
 - **Second Lunch**
 - 12:20 – 12:40 PM Lunch Grades 1-4
 - 12:20 – 12:40 PM Play Grades TK, K, 5-8
- Monday – Thursday Dismissal **2:55 PM**
- Friday Dismissal **12:00 PM**

REGISTRATION/ DOCUMENT INFORMATION

Please read the following information carefully before you complete the attached Application Form. If you have any questions, please don't hesitate to ask the office personnel.

1. The following documents are required for registration:
 - a) Completed Application and **\$40.00 application fee**
(due upon submission of application)
 - b) Immunization Record (Immunizations must be updated before entering school)
 - c) Birth Certificate, Baptismal Certificate and Social Security Card
(original documents only)
 - d) Last Report Card and/ or Standardized Test scores from previous school
 - e) Evaluation Form (attached)

2. Each child applying for grades TK, K-8 must take an entrance test.
 - a. Students applying for
 - i. ***Transitional Kindergarten must be 4 years old by September 1, 2020***
 - ii. ***Kindergarten students must be 5 years old by September 1, 2020***

3. New student entrance testing date for grades 1 - 8 will be determined later. Applicants will be called with ample notification prior to testing. TK and Kindergarten testing will be done on an individual basis (appointments will be scheduled at time of application submission). Completed applications must be submitted to the office before testing.

4. Interview with the principal will be scheduled at time of application submission.
Note: Application process will not be complete until the interview has been conducted.

5. Acceptance/ Non-Acceptance letters will be mailed to address on application.
Note: Once accepted and enrolled at St. Raymond School, all children will be placed on a probationary period for the First Trimester (August 2020 through November 2020).



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DATE: _____ / _____ / _____

APPLYING FOR GRADE: _____

Please Print Clearly

Student Information

MALE
 FEMALE

LEGAL NAME OF CHILD (LAST, FIRST, MIDDLE)

HOME ADDRESS

CITY

STATE

ZIP CODE

Home Phone # (____) _____ - _____ Father's Cell # (____) _____ - _____ Mother's Cell # (____) _____ - _____

_____/_____/_____
DATE OF BIRTH

PLACE OF BIRTH (CITY & STATE)

_____-_____
CHILD'S SSN #

NAME OF PRESENT SCHOOL: _____

SCHOOL ADDRESS

CITY

STATE

ZIP CODE

_____/_____/_____
DATE OF BAPTISM

NAME OF CHURCH

LOCATION (CITY & STATE)

N/A

_____/_____/_____
DATE OF COMMUNION

NAME OF CHURCH

LOCATION (CITY & STATE)

N/A

Parent/ Guardian Information

FATHER'S OR GUARDIAN'S NAME

PLACE OF BIRTH (CITY & STATE)

OCCUPATION

MARITAL STATUS

RELIGION

FATHER'S E-MAIL

MOTHER'S OR GUARDIAN'S NAME

PLACE OF BIRTH (CITY & STATE)

OCCUPATION

MARITAL STATUS

RELIGION

MOTHER'S E-MAIL

IF APPLICABLE:

_____/_____/_____
DATE OF MARRIAGE

NAME OF CHURCH OR COURT

LOCATION (CITY & STATE)

N/A

SCHOOL FAMILY WHO REFERRED YOU _____

Family Information

SIBLINGS

_____	_____	_____
CHILD #1 (LAST, FIRST, MIDDLE)	CURRENT SCHOOL	GRADE
_____	_____	_____
CHILD #2 (LAST, FIRST, MIDDLE)	CURRENT SCHOOL	GRADE
_____	_____	_____
CHILD #3 (LAST, FIRST, MIDDLE)	CURRENT SCHOOL	GRADE

Parish Information

_____	_____	_____	\$ _____
NAME OF PARISH	CITY	ENVELOPE NO.	WEEKLY DONATION

How are you involved in our Parish? _____

As a parent, I would like the Principal and Pastor to be aware that: _____

I agree to attend Mass on Sundays with my children, to pay tuition and school fees in full and on time, participate in fundraisers, and volunteer my time at St. Raymond School.

_____	_____
FATHER OR GUARDIAN SIGNATURE	MOTHER OR GUARDIAN SIGNATURE

FOR OFFICE USE ONLY

Principal's Notes: _____

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Birth Certificate | <input type="checkbox"/> Baptismal | <input type="checkbox"/> SSN Card | <input type="checkbox"/> Immunization Record |
| <input type="checkbox"/> Report Card | <input type="checkbox"/> Communion Certificate | <input type="checkbox"/> CHDP Form | FACTS Form ____ / ____ / ____ |
| App. Fee \$40.00 ____ / ____ / ____ | Reg. Fee \$100.00 ____ / ____ / ____ | Student Fee \$225.00 ____ / ____ / ____ | |

Due Dates → Documents/ Reg. Fee _____ Student Fee/ FACTS _____



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Evaluation Form

(Please give to Principal/ Administrator of the current school in attendance)

DATE: _____ / _____ / _____

APPLICATION FOR GRADE: _____

STUDENT'S NAME (LAST, FIRST, MIDDLE)

PRESENT GRADE

_____/_____/_____
DATE OF BIRTH

The student named above is applying for admission to St. Raymond School. We would appreciate your cooperation in the evaluation of this student.

1. Length of time in this school: _____ years
2. Please use the following scale to describe the applicant:

E: Excellent

G: Good

F: Fair

P: Problem Area/ Room for Growth

_____ General Attitude

_____ Cooperation

_____ Relationship with Teacher

_____ Respects Authority

_____ Relationship with Peers

_____ School Study Habits

_____ Attendance Record

_____ Attitude toward school

3. Area of ability for group placement:
 - 1 – Above Grade Level
 - 2 – On Grade Level
 - 3 – Below Grade Level

Mathematics: _____

Reading: _____

Language Arts: _____

4. Level of Discipline (please check one): Outstanding Good Satisfactory Poor

Has the student ever been subject to disciplinary action: Yes No

Comments: _____

5. Attitude and degree of involvement (please comment): _____

6. Based on the work that the applicant has completed in your school, please rate the total progress of this student:

- | | |
|--|--|
| <input type="checkbox"/> Outstanding Student | <input type="checkbox"/> Working Below Grade Level |
| <input type="checkbox"/> Above Average Student | <input type="checkbox"/> Needs Special Help with Education |
| <input type="checkbox"/> Average Student | |

7. Has this student ever been recommended for or identified as needing:

- | | | |
|--------------------------|------------------------------|-----------------------------|
| a) Psychological Testing | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| b) Special Education | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| c) Gifted Program | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| d) Grade Retention | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Name of School: _____ Phone # (_____) _____ - _____

Address: _____
STREET CITY STATE ZIP CODE

SIGNATURE OF PERSON COMPLETING REPORT

PRINCIPAL'S SIGNATURE

Evaluating School: _____

Please Note that St. Raymond will also need the student's current school transcript. Please ask the school for a copy of the transcript and bring it to us along with the application.

Please enclose this evaluation form along with a copy of the transcript in a **sealed** envelope and mail to:

Mrs. Claudia Rodarte, Principal
St. Raymond School
12320 Paramount Boulevard
Downey, CA 90242