



INFORMATION

Tuition - \$7,500

- Active Parishioners are eligible for a \$2,000 subsidy making tuition \$5,500
- Families may qualify for an Ohio EdChoice, a full/partial EdChoice Expansion or a Jon Peterson Scholarship
- Additional scholarship money is available to qualifying families

School Fees

School Fees are due upon registration and are non-refundable unless student is not accepted.

Single Child - \$200

- o \$100 Registration Fee
- o \$50 Festival Support/Raffle Tickets*
- o \$50 School Supply Fee

Multiple Children - \$250

- o \$125 Registration Fee
- o \$75 Festival Support/Raffle Tickets*
- o \$50 School Supply Fee

*Raffle tickets will be distributed in the Spring

STUDENT INFORMATION

Name (First, Middle, Last):			
Grade Entering:	Date of Birth:	/	/
		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Home Address:			
City:	State:	Zip Code:	
City and State of Birth:		Social Security Number (last 4):	
Ethnicity: <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> Multi-Racial <input type="checkbox"/> Latino <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American			
School Coming From:		District of Residence:	
Religion:		Parish (If Catholic):	
Baptized:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Batismal Church:	
Batismal Date:	Batismal Church City & State:		

HOME LANGUAGE SURVEY

Student's first (native) language:
Language student speaks most frequently:
Language most often spoken by adults at home:

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name:	
Relationship to Student:	
Phone Number:	Email Address:
Home Address (if different from student):	
Occupation:	Employer:
Parent/Guardian Name:	
Relationship to Student:	
Phone Number:	Email Address:
Home Address (if different from student):	
Occupation:	Employer:

OTHER PRE-KINDERGARTEN EXPERIENCE

- CPS Preschool/Head Start
 Non-CPS Head Start
 Full Day/Full Year Child Care
 Part-Time Private Preschool
 Family Child Care Home
 Home
 Other

ANNUAL CLASS ROSTER

I authorize the following information to be listed on the parent roster:

- My child's name Yes No
Parent/Guardian's name(s) Yes No
Telephone number Yes No

SOCIAL MEDIA POLICY

Please indicate: agree do not agree that Parish and School and/or the Archdiocese may use my Child's portrait or photograph for promotional purposes, website, and office functions.

**Complete Social Media Policy can be found in our Parent/Student School Handbook.*

CONSENT & AGREEMENT

I understand that any inaccurate information provided about this student on each page of the Student Registration Information forms may result in a change of grade level, a change of class, or an immediate transfer/withdrawal from this school. I agree to pay St. Cecilia for the school year 2026-2027. I understand that a late fee of \$25 will be applied each month for late payments. I agree to commit to the required 20 hours of service time per family.

St. Cecilia School admits students of any sex, race, color, nationality and ethnic origin to all rights, privileges, programs and any activities generally accorded or made available to students at St. Cecilia School.

Parent/Guardian Signature: _____ Date: _____

**Registration is not complete unless all paperwork and fees are submitted.*

SCHOOL OFFICE USE ONLY

Documents Required:

- Birth Certificate
- Proof of Address
- Immunization Records
- Private/Parochial School Form
- Tuition Payment Preference Form

Additional Documents:

- EdChoice/JPSN Forms
- Baptismal Certificate
- Custodial Paperwork
- Income Verification
- Copy of ETR, IEP, 504 Plan

School Fee:

- Paid
 - Cash
 - Check
 - Credit Card

Date Paid: _____

Date Admitted: _____

Staff Initials: _____

School ID: _____