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# Application for Admission

## 2025-2026

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### THIS APPLICATION CONTAINS THREE SECTIONS:

- ♦ **Student Application** to be completed by the parent legal/guardian and returned to the VASJ Admissions Office.
- ♦ **2 Student Recommendation Forms** to be completed by:  
the student's **English teacher, Math teacher, or an Administrator (Guidance Counselor, Principal, or Assistant Principal)** at their school.  
Please provide them with this form and ask them to **return it to VASJ** themselves. The Recommendation Form **should not** be returned to the family. *Recommendations returned by the applicant or their family will not be accepted.*
- ♦ **Transcript Request Form** to be signed by a parent or legal guardian and turned in to the student's school.

Once all required information is returned to the VASJ Admissions Office, the Admissions Review Committee will evaluate your file and notify you of its decision. Please note that the committee bases its decision on the information that is available to them. An incomplete file will not be processed and can result in denial of admission to VASJ. Letters notifying students of admissions decisions will be mailed after the admissions procedure is complete and the admissions committee has made its decision.



Villa Angela-St. Joseph

HIGH SCHOOL

*Faith. Family. Future.*

18491 Lakeshore Blvd.  
Cleveland, OH 44119

216-481-8414 ext. 285  
admissions@vasj.com

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**A parent or legal guardian must complete all information with the exception of the applicant's essay. Please double check to ensure that all sections are complete.**

**Please print legibly in ink.**

**All questions are required. Incomplete applications will not be processed.**

**Applications must be complete, with all required documentation,  
within 4 weeks of submission.**

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**Student Full Legal Name:** \_\_\_\_\_ **Current Grade:** \_\_\_\_\_  
(as on your birth certificate)

**Current School:** \_\_\_\_\_  
\_\_\_\_\_ Charter School \_\_\_\_\_ Public School \_\_\_\_\_ Other: \_\_\_\_\_

**Applying for:** \_\_\_\_\_ 9th Grade \_\_\_\_\_ 10th Grade \_\_\_\_\_ 11th Grade \_\_\_\_\_ 12th Grade

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Gender:** \_\_\_\_\_ Male \_\_\_\_\_ Female

**Are You Catholic?** \_\_\_Yes \_\_\_No **If Yes, Parish Affiliation:** \_\_\_\_\_

**Student Home Address:** \_\_\_\_\_

**City/Zip:** \_\_\_\_\_

**Mother/Guardian:** \_\_\_\_\_  
First Name Last Name

\_\_\_\_\_  
Phone Number Email

**Father/Guardian:** \_\_\_\_\_  
First Name Last Name

\_\_\_\_\_  
Phone Number Email

**If one or both parents have a different address than the applicant, list below:**

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**Student currently resides with (circle):**    Mother       Father       Both

**ALL QUESTIONS ARE REQUIRED.**  
**Incomplete applications will not be processed.**

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**How did you first hear about VASJ?**

☐ Alumni   ☐ Current Student   ☐ Advertisement   ☐ Other: \_\_\_\_\_

**Do you currently participate in either of the following Department of Education Scholarship Programs?**

☐ Cleveland Scholarship Program

☐ EdChoice Program

☐ Jon Peterson Scholarship

☐ Autism Scholarship

**Does the student have an Individualized Education Plan (IEP) or Individual Service Plan (SP)?** If yes, please provide an updated copy of the IEP and ETR with the application.

☐ Yes                      ☐ No

**Has the student ever been expelled or asked to withdraw from any school?**

☐ No                      ☐ Yes - If yes, please explain below:

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**5. Were you referred by a current VASJ family?** If yes, please name student/family.

☐ No

☐ Yes: \_\_\_\_\_

**Please list younger brother and sisters:**

Name	Date of Birth	Gender	Current School	Grade
		M      F		
		M      F		
		M      F		
		M      F		

**Please list family members who are Villa Angela, St. Joseph or VASJ graduates or current students:**

Name	Graduation Year	Relationship

**Extracurricular Activities:**

Please list any involvement or student achievements below:

**Clubs:** \_\_\_\_\_

**Academics:** \_\_\_\_\_

**Parish/Religious**

**Involvement:** \_\_\_\_\_

**Service Projects:** \_\_\_\_\_

**Athletics:** \_\_\_\_\_

**Other:** \_\_\_\_\_

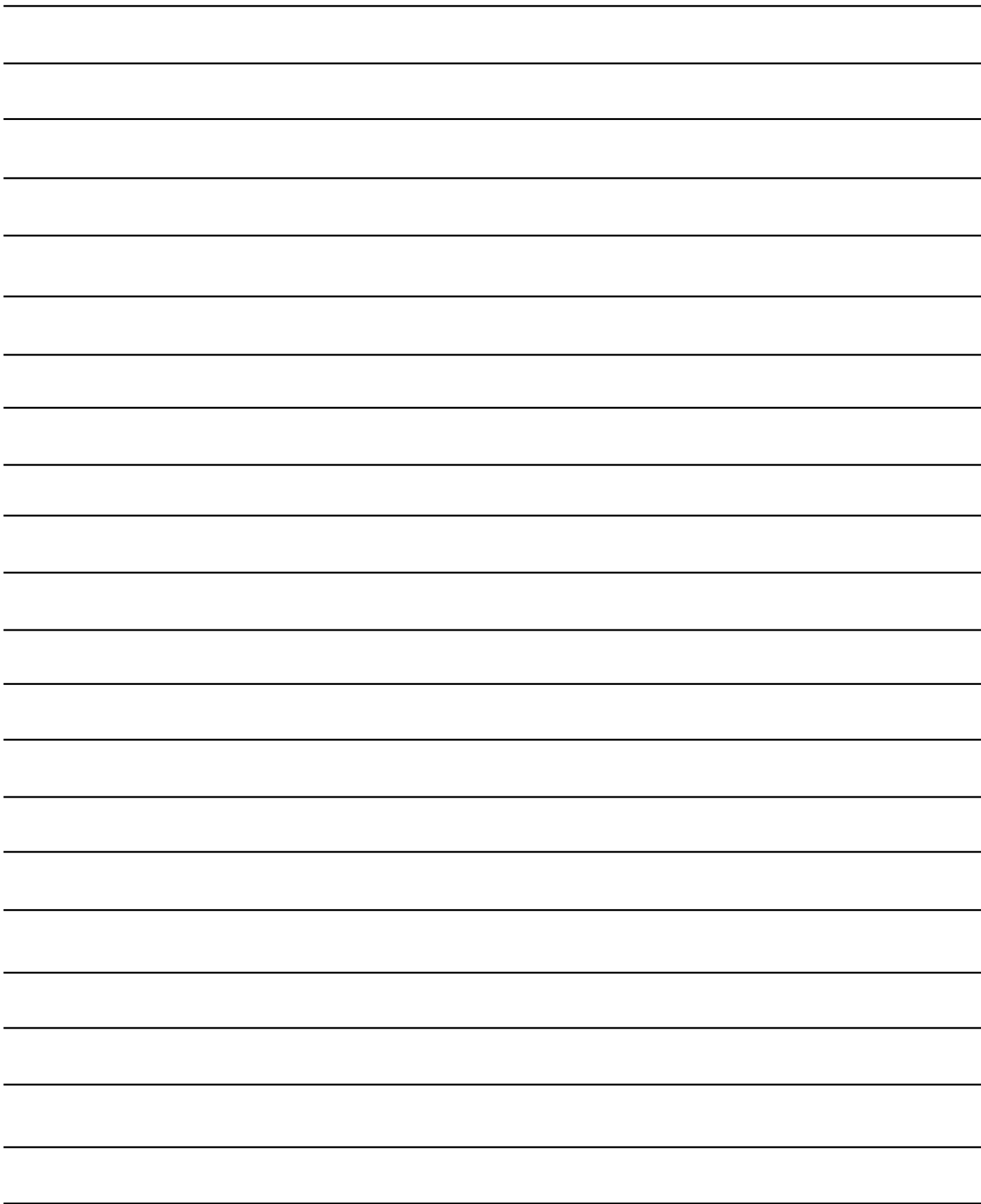
\_\_\_\_\_

Student must legibly handwrite essay using proper spelling, grammar, and punctuation. Use a separate piece of paper if necessary.

**Why are you interested in attending Villa Angela-St. Joseph High School?**

**Why would like to transfer from your present school to Villa Angela-St. Joseph High School?**

[illegible]



## Why do you want your child to attend Villa Angela-St. Joseph High School?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

☐ By checking this box, I declare and affirm that I am the student's parent/legal guardian.

Parent/Guardian Signature: \_\_\_\_\_

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

**Applications can be submitted by mail or email to:**

VASJ Admissions Office  
18491 Lakeshore Blvd.  
Cleveland, OH 44119  
admissions@vasj.com



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# Student Recommendation Form #1

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To be completed by applicant's English Teacher, Math Teacher, or Administrator  
(Guidance Counselor, Principal, Assistant Principal).

**Please return this form directly to the VASJ Admissions Office.  
DO NOT RETURN COMPLETED FORM TO STUDENT.**

Name of Applicant: \_\_\_\_\_

School: \_\_\_\_\_ Current grade: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

**The student named above is an applicant for admission to Villa Angela-St. Joseph High School, a Catholic, comprehensive, co-educational high school.**

**In order to consider students carefully, we ask the professional educators who have worked with them to evaluate their strengths and weakness, both as students and as people. This information will be held in strict confidence.**

**We appreciate and thank you for your cooperation.**



Please circle the number on the scale below that you feel best characterizes this applicant.

	<u>Outstanding</u>	<u>Good</u>	<u>Average</u>	<u>Poor</u>	<u>No Basis</u>
Academic Behavior	4	3	2	1	0
Relationship with Leaders	4	3	2	1	0
Study Habits	4	3	2	1	0
Conduct/Discipline in Class	4	3	2	1	0
Respect for Others	4	3	2	1	0

Has the applicant been disciplined for serious misconduct? (suspensions, excessive detentions, excessive tardies, etc.)

☐ No      ☐ Yes (explanation required)

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Please share what stands out about the student (positive or negative regarding behavior, character, academics, etc.) Also include the length of time you’ve known the student:

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How do you recommend the applicant?

☐

Enthusiastically

☐

Fairly strongly

☐

With reservation

*Explanation  
required below*

☐

Prefer not to recommend

*Explanation  
required below*

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

Please print your name and title: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

**TO RETURN THIS FORM:**

**Please scan and email to [admissions@vasj.com](mailto:admissions@vasj.com) or return to:**

VASJ Admissions Office — 18491 Lakeshore Blvd., Cleveland, OH 44119

**Contact the Admissions Office with any questions at (216) 481-8414 ext. 284 or at [admissions@vasj.com](mailto:admissions@vasj.com).**

*Please do not return this form to the applicant.  
Recommendations returned by the applicant  
or their family will not be accepted.*



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# Student Recommendation Form #2

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To be completed by applicant's English Teacher, Math Teacher, or Administrator  
(Guidance Counselor, Principal, Assistant Principal).

**Please return this form directly to the VASJ Admissions Office.  
DO NOT RETURN COMPLETED FORM TO STUDENT.**

Name of Applicant: \_\_\_\_\_

School: \_\_\_\_\_ Current grade: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

**The student named above is an applicant for admission to Villa Angela-St. Joseph High School, a Catholic, comprehensive, co-educational high school.**

**In order to consider students carefully, we ask the professional educators who have worked with them to evaluate their strengths and weakness, both as students and as people. This information will be held in strict confidence.**

**We appreciate and thank you for your cooperation.**

Please circle the number on the scale below that you feel best characterizes this applicant.

	<u>Outstanding</u>	<u>Good</u>	<u>Average</u>	<u>Poor</u>	<u>No Basis</u>
Academic Behavior	4	3	2	1	0
Relationship with Leaders	4	3	2	1	0
Study Habits	4	3	2	1	0
Conduct/Discipline in Class	4	3	2	1	0
Respect for Others	4	3	2	1	0

Has the applicant been disciplined for serious misconduct? (suspensions, excessive detentions, excessive tardies etc.)

☐ No      ☐ Yes (explanation required)

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Please share what stands out about the student (positive or negative regarding behavior, character, academics, etc.) Also include the length of time you’ve known the student:

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VASJ STUDENT RECOMMENDATION FORM #2 – page 3

How do you recommend the applicant?

☐

Enthusiastically

☐

Fairly strongly

☐

With reservation

*Explanation  
required below*

☐

Prefer not to recommend

*Explanation  
required below*

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

Please print your name and title: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

**TO RETURN THIS FORM:**

**Please scan and email to [admissions@vasj.com](mailto:admissions@vasj.com) or return to:**

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# Transcript Request Form

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**NOTE: This form is to be filled out completely, signed and returned to the student's CURRENT SCHOOL.**

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

**Student Address:** \_\_\_\_\_

**School Currently Attending:** \_\_\_\_\_

**School City:** \_\_\_\_\_ **Current Grade:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Email:** \_\_\_\_\_

☐ By checking this box, I authorize the release of the records requested below.

The above named student is being considered for admission to VASJ.

**Parent/Guardian Signature:** \_\_\_\_\_

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

**Student's Current School: Please provide VASJ with the following documents:**

- ♦ Student's 6th, 7th, and 8th grade report cards and state testing scores
- ♦ Student's attendance records
- ♦ Student's conduct reports

**The student's school should email these documents to:  
admissions@vasj.com**