



Our Lady of Grace School

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2010 – 2011 Application Process Checklist

PLEASE COMPLETE THE FOLLOWING PAGES AND RETURN THEM TO *OUR LADY OF GRACE SCHOOL* OFFICE WITHIN TWO WEEKS OF YOUR RECEIPT OF THIS APPLICATION. **Please complete ALL sections and return this page with your packet. You will be contacted to set up a testing date for your child after our receipt of a COMPLETE application packet. Please PRINT all areas legibly:**

Name of Applicant: _____ Applicant's Entering Grade: _____

Applicant's Date of Birth: _____ Current School: _____

\$150 Application/Testing Fee (per student; non-refundable): Check #: _____ Amount Received: _____

Registered Parishioner of OLG? _____ Your envelope # _____ Contribute to church using offering envelopes? _____

If not an OLG parishioner, the name of your parish: _____

Applicant's Date of Baptism: _____ at (Church Name) _____

ONLY COMPLETE APPLICATION PACKETS WILL BE PROCESSED.

Please check each of the following items, to ensure you have completed and returned ALL required documents:

1. This Application Process Checklist
2. Application Form for Enrollment (Please complete both sides of form.)
3. Our Lady of Grace School Admission Policies (Please sign and date bottom back of form and return with packet.)
4. Completed Pre-K or Kindergarten Questionnaire (If applicable. Questionnaire must be returned with application packet.)
5. ORIGINAL Birth Certificate (Office will copy for their records. Original must be returned with application packet.)
6. COPY of Baptismal Certificate (If applicable. Copy must be returned with application packet.)
7. COPY of First Communion Certificate (If applicable. Copy must be returned with application packet.)
8. COPIES of recent Report Cards (If applicable. Please submit previous 2 years and current year copies with packet.)
9. COPIES of Standardized Test Scores (If applicable. Please submit previous 2 years and current year copies with packet.)
10. Academic/Character Reference from current classroom teacher (If available. Reference may be mailed by teacher.)
11. COPY of up-to-date Immunization Records (If any immunizations pending, still submit most recent records.)

Notes for Office Use Only:

Notes: _____

Evaluation Date/Time: _____ Family Interview Date/Time: _____

Interviewed by: _____ Acceptance Status: _____