



HOLY FAMILY SCHOOL

130 Chapel Drive Syracuse, New York 13219 Telephone: (315) 487-8515 Fax: (315) 487-2086

www.holyfamilyschoolsyr.org

K – 6 NEW ADMISSION APPLICATION 2017 - 2018

Document

What To Do

Letter from Sister Christina Marie Luczynski

Read and File

Holy Family Admission Application

**** Complete and return to Holy Family School with \$50.00 PER CHILD APPLICATION FEE**

SMART Tuition Brochure

Read and File

**SMART Tuition Enrollment
(all new families must complete and submit this application)**

****Complete and return to Holy Family School Office with application. The annual \$39.00 fee for this service will appear on your first bill. TUITION COLLECTION BEGINS JULY 2017 AND CONTINUES MONTHLY THROUGH THE FOLLOWING 9 MONTHS THROUGH APRIL 2018.**

Parents—Important Notice-Financial Aid Document

Read for summary of process to apply for tuition assistance

Transportation Request

Check the BUSING APPLICATION line on the application. A Transportation Request Form, from your respective district, will be sent home to you Please return completed Transportation Request Form to the school office by March 20, 2017.

Media/Photo Release Form

****Complete and return to Holy Family School.**

Textbook Request Form

****Submit to the Holy Family School Office**

Additional Information

****Submit copies of Birth and Baptismal Certificates to the Holy Family School Office.**

Immunization Requirement

Up-to-date immunization records need to be submitted to the Health Office before Sept. 1st.

****Documents to be returned to the Holy Family school Office.**

Where Faith and Learning Come Together



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February, 2017

Dear Parents and Guardians,

Thank you for choosing Holy Family School for your child's education. We look forward to working with you in the coming year. We are proud of the faith formation and educational program that Holy Family School will offer to your child. Holy Family School is Middle States Accredited.

Attached to this letter is a packet with all the information you will need to submit an application. If you have any questions, please don't hesitate to call us (487-8515) or email me (cluczynski@syrdiocese.org). We are here to serve you and your family.

God bless!

Sr. Christina Marie Luczynski, CSSA

Sister Christina Marie Luczynski, Principal

A Member of the Diocese of Syracuse System of Catholic Schools
Application Form for New Admission 2017-2018
---Please Print---

Applying for new admission to the **Holy Family School:**

Grade Entering: _____

Student Name _____ DOB _____ Place of Birth _____

Last First Middle

Address _____ Male _____ Female _____

City _____ State _____ Zip _____

Religion _____ Parish _____

Other Children Re-Applying to this or other Catholic Schools:

Name _____ School _____ Grade Entering _____ DOB _____

Name _____ School _____ Grade Entering _____ DOB _____

Name _____ School _____ Grade Entering _____ DOB _____

Student lives with _____ Both Parents _____ Mother _____ Father _____ Other (please specify) _____

Parental Information:

Tuition Billing Address - mail to: _____

E-mail address _____

Note: Both parents have a right to school information regarding the student unless one parent presents a legal document that does not permit this.

Mother's Information: Mother/Guardian's Name _____ Religion _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Mother/Guardian's Occupation _____ Employer's Name _____

Father's Information: Father/Guardian's Name _____ Religion _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

Father/Guardian's Occupation _____ Employer's Name _____

<p>Person Responsible for Payment of Tuition -- must complete items 1-3 in order to register your child. (Please Print)</p> <p>1) Name _____ Address _____ City/State _____ Zip _____</p> <p>Home Phone _____ Employer's Name _____ Work Phone _____</p> <p>2) Please enclose a NON-REFUNDABLE APPLICATION FEE OF \$50.00 per child. Make check or money order payable to HOLY FAMILY SCHOOL. Please return all completed forms along with payment to main office.</p> <p>3) It is agreed that tuition will be paid as indicated above.</p> <p>Signature of person responsible for tuition: _____</p> <p>Please provide your Social Security Number: _____</p>

FOR OFFICE USE ONLY: Tuition Received: _____ Check #/Cash: _____
Date: _____ Tuition Charge: \$ _____

If Student is Catholic, please complete the following:

Baptism	First Penance	First Eucharist
Date _____	_____	_____
Church _____	_____	_____

Public School District in which the student resides _____ Bus Transportation Yes No

Current School or Pre-School _____ Grade _____ SS# _____

Reason for Leaving _____

Custody: This school assumes that both parents have full parental and residential custody. If this is not the case, it is the responsibility of the parents to provide the school with that portion of the divorce decree or separation agreement that articulates parental and residential custody. Should any changes occur during the year, please inform the school.

Please check here if the school should expect a custody document.

Ethnic background of student (optional)

This information is used to complete the New York State Basic Educational Data Systems report that all public and nonpublic schools are required to submit.

Academic Information:

Un-official copies of transcripts and reports have been requested or are attached for admission purposes. Acceptances are not final until records have been reviewed by the principal.

Does the student have a Behavioral Intervention Plan? Yes No. If yes, what are the terms of that plan? Please provide the school with a copy of that plan. Please specify below:

Does the student require any particular accommodations to facilitate his or her participation in the educational program offered by the school, other than what has been indicated in the question above? Yes No. If yes, what are those accommodations? Please specify below.

Has the student ever been tested for learning problems? Yes No.

Has testing for leaning problems ever been suggested? Yes No.

Does the student have an IEP or IESP? Yes No.

Does the student have a 504 Accommodation Plan? Yes No.

Please authorize copies of these documents to be sent to the School.

Does the student have any medical condition or allergies? Yes No Explain: _____

Is the student currently taking medications? Yes No. If yes, please specify: _____

Does the medication need to be administered during the school day? Yes No. If yes, when? _____

Emergency Contacts

Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Information Requests:

- Busing Application (Must be submitted to your public school district no later than April 1, 2017. Check with your district to determine if you qualify for transportation.
- Before and After School Program application.
- SMART Tuition Aid Analysis Application.

AFFILIATED RATES				NON-AFFILIATED RATES			
Affiliated Rate: The affiliated rate applies to families who are registered members of a Roman Catholic Parish. All affiliations are verified with the Pastor of the church designated on the enrollment form.				Non-Affiliated Rate: The non-affiliated rate applies to families who are NOT registered members of a Roman Catholic parish.			
GRADE	1 ST CHILD	2 ND CHILD	3 RD CHILD	GRADE	1 ST CHILD	2 ND CHILD	3 RD CHILD
K-6	\$4,800	\$4,550	\$4,300	K - 6	\$5,750	\$5,750	\$5,750

2015-2016 TUITION PAYMENT POLICY:

1. A student may not begin in September if there is past due tuition owed.
2. A Smart Tuition payment plan must be in place in order for a student to start the new school year.
3. The privilege of participating in graduation ceremonies may be suspended if tuition is not paid in full.
4. Personal checks will not be accepted for past due tuition during the month of June and again after August 15th.
5. In the event that tuition is left unpaid, the school will refer your tuition account to our collection attorney and you will be responsible for all collection related fees.

I/We have read the tuition and payment policy of the school. I/We are responsible to make tuition and fee payments for the student whose name is on this application, less any financial aid granted for the 2017-2018 school year.

I/We understand that the school must be informed of any physical, mental or emotional limitation known by the parents that could affect appropriate placement. Providing inaccurate or incomplete information during the application process will result in non-acceptance or dismissal from the school. Classroom placement is determined by the school.

I/We understand that the *Student Handbook* contains the official policies and procedures of the school.

Mother/Guardian's Signature

Date

Father/Guardian's Signature

Date

Complete the

Complete the section below only if someone other than a parent will be responsible for the student's tuition.

Name(s) of the person(s) responsible for tuition if *other* than a parent:

Name _____ Home Phone _____

Address _____

Employer _____ Work Phone _____ Cell Phone _____

I have read the tuition and payment policy of the school. I am responsible to make tuition payments for the student whose name is on this application, less any financial aid granted, for the 2017-2018 school year according to the option selected above.

Signature of Person Responsible for Tuition Other than a Parent

Date

Social Security Number

This school is fully committed to fostering an educational community that is free from discrimination based on race, national origin, skin color, disabilities, age or gender, except as concerns any matter for which there is a statutory or judicially recognized exception for religious institution.

WELCOME!

Smart Tuition has been in business over 25 years serving private school families. We make paying your school tuition easy and convenient.

We offer:

- Automatic debit payment plans
- Online account information
- Mobile app for Apple and Android devices
- Detailed invoices
- Email & text message reminders
- 24 Hour parent help center
- English/Spanish phone support
- Live chat from your online account
- If your school allows credit cards, you can set up recurring payments on your MasterCard, Discover, American Express, or Visa

Get started by enrolling today!

AUTOMATIC DEBIT ENROLLMENT INSTRUCTIONS

1. Online Enrollment

Visit: www.enrollwithsmart.com

2. Find Your School

Enter your school's name in the search box. Make your selection by clicking the green circle.

3. Section 1: Who Will Pay?

Enter the parent, guardian or bill payer's contact information. Please provide your telephone number and email address as Smart Tuition regularly communicates important information about your account via telephone and email.

4. Section 2: Who Will Attend?

Enter the names and grades of the children who will attend the school.

5. Section 3: How and When to Pay

Review the payment plans offered by your school and choose one. The plans listed are selected by your school and cannot be changed by Smart Tuition. Next, select your preferred due date from the options offered by your school. Your school requires automatic deduction. You will need to provide your checking, savings, or credit card information for processing your payments.

6. Section 4: Submit

Review Smart Tuition's terms and conditions. Click **SUBMIT ENROLLMENT** to complete your online enrollment.

7. Confirmation

Upon online enrollment completion, a confirmation page will display and a confirmation email will be sent to you.

8. Account Activation

Once your school has reviewed and activated your account, you will receive an email with login instructions.

To view your balance, make payments, update your personal information, or chat with a live representative, access your Smart Tuition account at www.parent.smarttuition.com

PLEASE NOTE: The Smart Tuition program manages tuition payments and follows the policies established at the school. Decisions regarding tuition amounts, tuition aid, scholarships, and all other tuition related items are made by your school.

We look forward to working with you and your family this year!

Our parent help center is always available to assist you. We're open 24 hours a day, 365 days a year.

ENROLLING ONLINE IS A QUICK AND EASY PROCESS!

 **SMART TUITION**
Financial Solutions for Schools and Parents™

OUR SCHOOL REQUIRES AUTOMATIC DEBIT



AUTO DEBIT
Set up automatic withdrawal from your bank checking or savings account.



AUTO CREDIT CARD PAYMENT
If your school allows credit cards, you can set up regularly recurring payments on your MasterCard, Discover, American Express, or Visa.



ADDITIONAL ONLINE PAYMENTS
Convenient and secure web payments are made at parent.smarttuition.com.



PHONE
Call us toll free at (888) 868-8828 and make a touch tone phone payment or you can speak with a live parent support staff member 24 hours a day.

ENEFITS OF AUTOMATIC DEBIT

Automatic debit from your bank checking, savings, credit card account is:

Secure

Convenient

Reliable

Monthly payments are debited automatically, so you never need to worry about reminders, postage, or checks, or US Postal Service delivery delays.

Payments to automatic debit require 3 business days notice prior to debit date.

Reminder email and optional text message will be sent 7-10 days prior to your debit date.

CONNECT WITH US:

ENROLL WITH US:
www.enrollwithsmart.com



(888) 868-8828



parents@smarttuition.com



parent.smarttuition.com

ENROLLMENT FOR PARENTS



SMART TUITION
Financial Solutions for Schools

001288090



EnrollWithSmart.com

Visit www.enrollwithsmart.com to complete this form online.

Enroll Faster. Enroll Easier. Enroll **SMARTer!**

1 1 5 1 9 1 7 1 8 0

PLEASE ENTER FAMILY INFORMATION

FIRST NAME OF PARENT/GUARDIAN/BILL PAYER

LAST NAME OF PARENT/GUARDIAN/BILL PAYER

2017-2018

*FIRST NAME OF ADDITIONAL AUTHORIZED PARTY

*LAST NAME OF ADDITIONAL AUTHORIZED PARTY

STREET ADDRESS OR P.O. BOX

APT#

CITY

STATE

ZIP CODE

HOME TELEPHONE NUMBER

MOBILE TELEPHONE NUMBER

EMAIL ADDRESS (Smart emails reminders for upcoming payments)

SELECT A PAYMENT METHOD

I authorize SMART to automatically debit my payments from the below provided account. I agree to the following automatic payment date:

Your school allows the following due dates:
1, 10, 20

PLEASE DEBIT MY:

CHECKING (PLEASE ATTACH A VOIDED CHECK) OR SAVINGS

9 DIGIT ROUTING NUMBER

BANK ACCOUNT NUMBER

SELECT A PAYMENT PLAN

Plan A	1 Payment	Aug (Due August 1 st)
Plan B	10 Payments	Jul - Apr
Plan C	2 Payments	Jul, Jan
Plan D	4 Payments	Jul, Oct, Jan, Apr
Plan E	10 Payments	Aug - May

ENTER PLAN LETTER HERE

ENTER STUDENT INFORMATION

Choose from the following grades: N2, N3, N5, PK3, PK5, K, 1 - 6

GRADE	FIRST NAME OF STUDENT	LAST NAME OF STUDENT
-------	-----------------------	----------------------

GRADE	FIRST NAME OF STUDENT	LAST NAME OF STUDENT

*OPTIONAL SCHOOL FAMILY ID

*OPTIONAL TYPE CODE

PLEASE READ AND SIGN

I have read and agree to the terms and conditions on the reverse side of this document. I agree that the school may re-enroll me in the Smart Tuition payment program for each subsequent school year. I agree to pay the amount established by my school for the student(s) above by my specified due date. I realize that if I fail to have a payment posted or if there is an outstanding balance on my account by the specified due date, Smart Tuition may contact me via email and telephone and a late fee of \$40.00 will be assessed to my account. A \$30.00 fee will apply for any failed electronic transaction or dishonored check.

PRIMARY BILL PAYER _____

DATE / /

FOR SCHOOL OFFICE USE ONLY

THIS FAMILY IS ENROLLING LATE
 SPREAD BALANCE ACROSS REMAINING MONTHS OF PLAN
 COLLECT BALANCE IN FIRST MONTH

*OPTIONAL STUDENT ID

	STUDENT TUITION 1	\$			
	STUDENT TUITION 2	\$			
	STUDENT TUITION 3	\$			
	STUDENT TUITION 4	\$			
FAMILY TUITION SUBTOTAL		\$			

FEES & DISCOUNTS

If fees and discounts should be applied in addition to the tuition amounts included above, please contact your account manager.

SMART ADMINISTRATIVE FEE	+		39	00
ANNUAL TOTAL DUE	\$			

PARENTS----- IMPORTANT NOTICE----- FINANCIAL AID FOR 2017/2018

SMART Tuition Aid Analysis (STAA) will be accepting financial aid applications from our parents for the upcoming school year. The Diocese does not extend financial aid awards to families unless they have applied for financial aid. Parents interested in receiving aid need to submit their applications with the required supporting documentation by March 15th, 2017. Online applications are accepted from all families with a Smart Aid application fee of \$22.00 per family. You may apply on-line at www.smarttuitionaid.com.

All applications require supporting documentation in order to be considered a COMPLETE application. Parents must submit this documentation in order for their application to be processed. Applications received without the supporting documentation will not be processed. Required documents include:

- Most recent pay-stubs and 2016 W2 statements for all jobs
- Most recently filed 2016 federal tax form (1040, 1040A, 1040EZ with all schedules)
- Most recently filed 2016 business tax return (1041, 1065, 1120, or 1120S if applicable)
- Any supplemental income documentation (1099, social security, welfare, food stamps, child support, unemployment, worker's compensation, veterans benefits, rental income, etc.)

IF YOUR FINANCIAL AID APPLICATION REMAINS INCOMPLETE, YOUR CHILDREN WILL NOT BE ELIGIBLE TO RECEIVE FINANCIAL AID (TAP A) AWARDS.

SMART Tuition Aid will notify you of missing information via the email address you provided on your application. Please check your email and spam folder often until you know your application is complete. If you didn't provide an email address, SMAA will contact you via regular mail.

- If you have questions or concerns regarding your financial aid application, documents required, or the status of your application — PLEASE CALL SMAA AT 1-800-360-8027 OR EMAIL support@smarttuitionaid.com
- SMART Tuition Aid habla Espanol. Favor de llamar si tiene cualquier pregunta sobre el proceso de solicitador, los documentos necesarios, o el estatus de su solicitud!



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HOLY FAMILY SCHOOL K-6 UNIFORM CODE

2017-2018

EXCLUSIVE VENDOR: LANDS' END

BOYS

PANTS/SHORTS: Khaki with brown or black belt
SHIRT: Short or long sleeve green or white mesh polo with logo

Boys may wear shorts Sept./Oct. and May/June.

SOCKS: Navy, Tan, Green or White (parent choice of vendor)

SWEATER: Evergreen drifter vest with logo or half zip fleece with logo. **UNIFORM SHIRT MUST BE WORN UNDER THE SWEATER AND FLEECE.**

SHOES: Black or brown

Hair should be neat and not touching the collar.
Shirts must be tucked in.

BOYS

SHORTS: Green mesh shorts with logo
SWEAT PANTS: Green with logo
SHIRT: Short or long sleeve gray shirt with logo (local vendor—not Lands End); must be ordered through the school office)

The complete gym uniform is to be worn all day on gym days.
The sweatpants are to be worn over the shorts except Sept/Oct and May/June.
Sneakers and white socks (must be worn above the ankle) are required.

Please note that any uniform questions/issues/decisions are under the sole determination and discretion of the principal.

IF YOUR CHILD IS NOT IN COMPLIANCE WITH THE UNIFORM POLICY, YOU WILL BE NOTIFIED BY YOUR CHILD'S TEACHER. IF YOU HAVE ANY QUESTIONS CONCERNING THE UNIFORM POLICY, PLEASE CALL THE SCHOOL OFFICE. THANK YOU FOR YOUR COOPERATION.

TO ORDER UNIFORMS FROM LANDS' END, GO TO

<http://www.landsend.com/pp/SchoolSearch.html?action=landing&selectedSchoolNum=900027897>

GIRLS

PANTS: Khaki with brown or black belt
SHIRT: Short or long sleeve green or white mesh polo with logo

OR

PLAID SKORT: may be worn with green or white mesh short or long sleeve polo with logo or with half zip fleece with logo.

UNIFORM SHIRT MUST BE WORN UNDER THE SWEATER AND FLEECE.

SOCKS (knee socks or ankle) OR TIGHTS: Green, white or navy (parent choice of vendor)

SWEATER: Evergreen cardigan with logo, Drifter vest with logo or half zip fleece with logo

SHOES: Black or brown

Girls may wear earrings with posts; no dangling earrings or makeup; Solid black, green or navy headbands are permitted; shirts must be tucked in.

GIRLS

SHORTS: Green mesh shorts with logo
SWEAT PANTS: Green with logo
SHIRT: Short or long sleeve gray shirt with logo (local vendor—not Lands End); must be ordered through the school office)

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Textbook Request

Family Name _____ Home Phone _____

Address: _____

Street City State Zip

Residing in _____ Public School District

Attending _____ School

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

I, the undersigned, request that the above-mentioned school district loan to my child(ren) the textbooks required for his/her/their education, and hereby authorize the principal of the school to act as my agent in the implementation of this request.

This authorization shall remain in effect while my child(ren) are attending this school, unless I expressly revoke it in writing.

I understand that all books loaned to my child(ren) are to be maintained in good condition, and that said child(ren) will be responsible for the loss or excessive damage to these books.

Signature of Parent or Guardian

Date



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Media/Photo Release Authorization

I understand that Holy Family School will be publishing certain advertisements relative to the school and that a picture or other material including my child or me may be included in one or more of those advertisements. I give the school and anyone acting on their behalf permission to use any photograph, videotape or other recording for public viewing in any print or broadcast media (e.g., radio, newspapers, magazines, brochures, television, etc.) or in displays. I also permit the school and anyone acting on their behalf to use any statement or part of any statement that I chose to make in any such broadcast, article or display.

I release the school, employees, agents and representatives from any liability arising out of the use of any such photograph, videotape, other recording or statement for public viewing in any print or broadcast media.

I agree that this release may be revoked by me at any time in writing. Any such revocation will apply to the future use of any picture, film, statement, of my child or me, but will not apply to any materials already produced and in use by the school. I intend the release to be binding upon me, my heirs, executors, administrators, successors and/or assigns.

Student Name: _____ Grade _____

Parent's Signature: _____

Printed Name of Releaser: _____

Date: _____