



Saint Francis School
 "QUALITY CATHOLIC EDUCATION IN A SPIRIT OF JOY!"
 2707 Pamoia Road, Honolulu Hawai`i 96822
 Phone: (808) 988-4111 Fax: (808) 988-5497
www.stfrancis-oahu.org

FOR OFFICE USE ONLY:	
Application Fee Paid: _____ <small>(40709)</small>	
Check _____	Cash _____

Saint Francis School is a private Catholic School for students governed by a Corporation Board under the jurisdiction of the Sisters of Saint Francis.

Application for Admission

Submit completed application with non-refundable application fee:

Domestic (Hawai`i, Continental U.S.) \$40 International (Foreign Countries) \$75

Please type or print legibly.

Student's Information

Student's Name: Last, First, Middle Initial _____		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Grade Applying For _____
Address _____	City _____	State (Country) _____	Zip _____	
Mailing Address (if other than above) _____	City _____	State (Country) _____	Zip _____	
Home Phone Number _____	Listed <input type="checkbox"/>	Unlisted <input type="checkbox"/>	Birthdate _____	
U.S. Citizen Yes ___ No ___ Other ___	Social Security # (if available) _____			

Parent(s) Information

Father's Name (Last, First) _____	Living: Yes <input type="checkbox"/> No <input type="checkbox"/>	Religion _____	E-mail _____
Name of Business/Company _____	Occupation _____	Daytime/Cell Phone Number _____	
Mother's Name (Last, First) _____	Living: Yes <input type="checkbox"/> No <input type="checkbox"/>	Religion _____	E-mail _____
Name of Business/Company _____	Occupation _____	Daytime/Cell Phone Number _____	
With whom does the applicant live?	Both Parents <input type="checkbox"/>	Father <input type="checkbox"/>	Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other <input type="checkbox"/>

Guardian(s) Information (All students whose primary residence is not on the island of O`ahu or does not live with parents must have a guardian who lives on the island. Please fill out this section if applicable)

Guardian's Last Name _____	First _____	Middle _____	Relationship _____
Address _____	City _____	State _____	Zip Code _____
Occupation _____	Name of Business/Company _____	Home Phone _____	Business Phone _____

Last three schools attended (If applicable, list current school first)	Grade(s) Attended
SCHOOL	State (Country)
<hr/>	
<hr/>	
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Additional information (question “a” for students entering 6th – 12th grade only)

a) Why do **you as a student** wish to attend Saint Francis School? (Please attach a separate sheet, if necessary) _____

b) Please indicate any special circumstances which may have affected the applicant’s educational progress, e.g. illness, grades skipped, grades repeated, extensive travel, divorce, family death, physical/learning disability, etc. _____

c) Who/What motivated you to apply for admission to Saint Francis School? (Please number the following as they apply to you. Begin with #1 as the strongest motivation.)

	student	friend	relative	news ad	TV ad	radio	school video	recruiting @ school	other
STUDENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PARENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d) Please list the names of any relatives or siblings who are attending or alumna(e) of Saint Francis School:

First Name, Maiden Name, Last Name	Year of Graduation	Relationship to Applicant
_____	_____	_____
_____	_____	_____
_____	_____	_____

e) Student’s Main Ancestry: _____ f) Native Language: _____

g) If Catholic, Parish? _____

h) Has the student received: Baptism? Yes ____ No ____ First Communion? Yes ____ No ____ Confirmation? Yes ____ No ____

Saint Francis School does not attempt to replace the home, but assist it; not to replace society, but to prepare for it. Therefore, Saint Francis has chosen objectives, policies and procedures which it feels will best enable it to fulfill the primary task of cultivating the intellect, developing individuality, and inculcating in the students understanding of, appreciation of, and cooperation with other social units and their benefits, and contributing to the environment of which the student chooses to be a member.

In the event that a student’s account is not paid in full, Saint Francis School reserves the right to hold all grades, transcripts, and other records from being released to the student, her parents, guardians, or any educational institution requesting the information.

Saint Francis School does not discriminate based on ethnicity, religion, or socio-economic status.

We understand and agree to the above statements, and hereby submit this application for admission to Saint Francis School.

Date	Signature of Parent/Guardian	Signature of Student
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Please provide primary e-mail address: _____

Person responsible for bills (if other than Parent or Guardian):

Date	Signature	Relationship
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Address	City	State	Zip Code	Home Phone	Business Phone
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SAINT FRANCIS SCHOOL Admissions Procedures

OPEN HOUSE	November 06, 2011 and February 12, 2012
INTERVIEW DAY	February 25, 2012
NON-REFUNDABLE REGISTRATION DEPOSIT (Kindergarten – 5 th grade applicants)	May 10, 2012
NON-REFUNDABLE REGISTRATION DEPOSIT (6 th – 12 th grade applicants)	April 15, 2012

Check-list for Applicants

Date Sent

Completed application with \$40.00 application fee*
Kindergarten applicants must be 5 years old by 12/31/12 _____

“Consent For Release Of Information” form to the
applicant’s current/previous school(s) _____

“Teacher Reference Report” form
Submit to 1 teacher (Kindergarten -1st grade) _____
Submit to 2 current teachers (grades 2-12) _____

Kindergarten applicants only:
Copy of Birth Certificate _____
Preschool progress/evaluation report _____

9th Grade Applicants: Register for the
SSAT (Secondary School Admissions Test)
(Registration information is available at the Admissions Office) _____

Interview Appointment:

All applicants with completed files attend an
individual interview with their parent(s) on
Interview Day, Saturday, February 25, 2012
or by special arrangement. _____

*All fees are based on the 2011-2012 school year and are subject to change.

TUITION SCHEDULE, FEES, DISCOUNTS AND ASSISTANCE

Tuition schedule

Grades:	
K – 3	\$6300
Grade 4-6	\$7000
Grades 7-8	\$8200
Grades 9-12	\$9400

Fees

Application Fee:	\$40
Summer School*	\$275-\$295
* Mandatory for incoming 9th graders; optional for other grades; books are not included	

After/Before School Care: varies
(Please call the Admissions office for more details)

(Tuition and fees are based on the 2011-2012 school year and is subject to change for the 2012-2013 school year)

Discounts

Alumni - Awarded to students whose mother, grandmother, or great-grandmother graduated from Saint Francis School.

Sibling - Awarded to families who have siblings attending Saint Francis School.

Tuition Assistance & Scholarship Programs

For families needing financial assistance, costs may be met, in part, through the following scholarships and grants:

Saint Francis Schools TAP:

Support a Student (SAS)

Blessed Marianne Cope and

Sister Antoinette Almeida Scholarship

(9th grade applicants only)

Need/Merit based financial aid

Other financial assistance opportunities:

Augustine Educational Foundation Scholarship

Our TAP is part of a work-study program. For more information, please contact the Business Office at 988-4111, ext. 704.

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Consent For Release Of Information

Parent(s)/ Legal Guardian(s):

Please FORWARD this form to the school(s) your child has attended in the last two years.

(I/We) _____, parent(s) or legal guardian(s)
(Parents' Name)

of _____, hereby grant permission to
(Student's Name)

_____ to release to Saint Francis School
(Name of School)

document(s) and copies of educational records listed below:

- 1. Standardized Testing Results (if applicable)**
- 2. Report Card (current and previous school year) or Progress/Evaluation Report (Kindergarten applicants only)**

Signature of parent(s)/ legal guardian(s)

Address

City State Zip Code

Telephone Date

HAWAII ASSOCIATION OF INDEPENDENT SCHOOLS

Common Teacher Reference Report – Grades 2-12

Applicant's Name _____ Grade Applying _____
Last First Middle

Class Level: Accelerated _____ High _____ Average _____ Low _____ Heterogeneous _____

Subject and/or Grade _____ Self-contained Yes No

Please check (✓) the appropriate rating. N/A (not applicable) may be used in areas where there is insufficient information.

Academic Qualities

Motivation (effort, drive)	•	•	
	rare	moderate	maximum
Ability to work alone	•	•	
	needs help frequently	needs help occasionally	works well
Homestudy habits	•	•	
	never completes assignments	completes assignments	does more than expected
Participation in discussion	•	•	
	contributes when called on	volunteers occasionally	joins in readily
Ability to express ideas orally	•	•	
	has some difficulty	good	exceptionally good
Use of time	•	•	
	poor	average	excellent
Organization of work	•	•	
	poor	average	excellent
Follows direction	•	•	
	needs much explanation	needs occasional help	responds quickly

Personal Qualities

Leadership potential	•	•	
	a follower	occasionally seeks opportunities	natural leader
Classroom conduct	•	•	
	poor	average	excellent
Cooperates with adults	•	•	
	rarely	usually	always
Personal/social adjustment	•	•	
	relates poorly with others	fluctuating relationships with peers; generally happy person	healthy self image; healthy peer relationships
Ability to work in a group	•	•	
	rarely	usually	always
Consideration of others	•	•	
	rarely	usually	always
Takes initiative	•	•	
	rarely	usually	always
Fulfills responsibilities	•	•	
	rarely	usually	always
Uses suggestions or corrections	•	•	
	rarely	usually	always

We appreciate additional observations about this applicant. _____

Print or Type Name _____ Teacher's Signature _____

School _____ School Phone # _____ Date _____



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Teacher Reference Report

Applicant’s Name: _____

Address: _____

Phone: _____

Parent(s)/Guardian(s): Please follow the instructions below.

- 1) Please complete the top of this page and write the Student’s Name at the top of the back page.
- 2) Submit the Teacher Reference Report to the applicant’s present academic teacher.
- 3) Provide the teacher with an addressed, stamped envelope using the following address:

Saint Francis School
Attn: Admissions Office
2707 Pamoia Road
Honolulu HI 96822

- 4) Read and sign the release statement.

I understand the information on the Teacher Reference Report is confidential and will not be shared beyond the Admissions Committee.

Signature of Parent/Guardian

Date

Incomplete forms will be returned.

DUE DATE: January 15, 2012

Dear Teacher:

Your evaluation of this student is greatly appreciated. Please complete this Teacher Reference Report and return it directly to the Admissions Office by the due date listed above. Should you have any questions, you may contact the Admissions Director at (808) 988-4111, ext. 712.

Sincerely,

Admissions

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Admissions