



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)

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

Please provide primary e-mail address: _____

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

Date	Signature	Relationship

Address	City	State	Zip Code	Home Phone	Business Phone

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*	\$250
* Mandatory for incoming 9th graders; optional for other grades; books are not included	

After 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 K/1

Applicant's Name _____ Grade Applying _____
Last First Middle

Class Size _____ School hours _____ With teacher since _____
(month / year)

Does your school issue report cards/progress reports? Yes No

Please check (✓) the appropriate descriptor on this continuum. If not applicable, mark NA

Social and Emotional Behavior	Beginning	With teacher support	Growing independence	Consistent and independent
Works and plays cooperatively	•	•	•	
Works independently	•	•	•	
Accepts responsibility	•	•	•	
Exhibits self-control	•	•	•	
Is able to relate to adults	•	•	•	
Shows good attention span	•	•	•	

Work Habits and Attitudes	Beginning	With teacher support	Growing independence	Consistent and independent
Shows initiative	•	•	•	
Listens attentively	•	•	•	
Follows directions	•	•	•	
Completes assigned tasks	•	•	•	
Cares for materials	•	•	•	
Shows an active interest in classroom activities	•	•	•	

Learning Readiness	Beginning	With teacher support	Growing independence	Consistent and independent
Articulates appropriately for age	•	•	•	
Uses an adequate vocabulary	•	•	•	
Listens to and enjoys stories read to him/her	•	•	•	
Recalls specific story details	•	•	•	
Recalls main idea of a story	•	•	•	
Recognizes differences in sizes, shape and quantity	•	•	•	
Recognizes rhyming sounds	•	•	•	
Understands and uses number vocabulary	•	•	•	
Counts objects	•	•	•	
Small muscle coordination	•	•	•	

We appreciate additional observations about this applicant. _____

Print or Type Name _____ Signature _____

(Indicate: Teacher or Administrator)

School _____ School Phone # _____ Date _____

All HAIS schools accept this common form. Check the reverse side for date that completed form is due.



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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