



SAINT JOSEPH SCHOOL

Early Childhood • Elementary • Middle School

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Reverend Gregory Stowe, Pastor Mr. Joseph Pasonelli, Principal



New Student Registration Form 2018-2019

Student Name: _____ Date of Birth: _____ Age Sept 1: _____

Gender: M F Grade entering: _____ If Pre-K, ½ day or Full day _____ Primary Phone: _____

Student Lives Primarily at: _____
Street City State Zip Code

Deposit Paid: \$ _____ Check # _____ Cash

▶ Father's Name: _____ Occupation: _____

Cell Phone: _____ Work Phone: _____ Email: _____

Address (if different): _____
Street City State Zip Code

▶ Mother's Name: _____ Occupation: _____

Cell Phone: _____ Work Phone: _____ Email: _____

Address (if different): _____
Street City State Zip Code

▶ Applicant Lives Primarily with (check one): Both Parents Mother Father Other
If Other, Full Name, Relation to Student, and Phone number: _____

▶ Special Custody Situation (documentation required): _____

▶ Transportation TO School-AM (check all that could apply): Bus Automobile Walking
▶ Transportation FROM School-PM (check all that could apply): Bus Automobile Walking (Walkers are dismissed through the Intervale Street doors and they walk to a predetermined location.)

▶ List Student's PARENTS, BROTHERS or SISTERS who have graduated from, who are presently attending St. Joseph School or who are also applying at this time.

NAME: _____ RELATIONSHIP TO STUDENT: _____ GRADUATION YEAR: _____

▶ Present School: _____ Current Grade: _____ Grade Next Year: _____

Mission Statement

St. Joseph School promotes a positive, structured, safe and nurturing environment in which the whole child may develop. We provide a quality education program with emphasis on the cultivation of Catholic Christian values and virtues helping our students to become the person God intends.

▶ Are you transferring from another school? If so, briefly explain reason: _____

▶ Parish/Church Name and Town: _____

Catholic Non-Catholic Student's Religion if not Catholic: _____

▶ Ethnicity (Optional): Asian African American Hispanic Native American White Multi-Racial Other

▶ Has your child received any special needs services or have they ever been recommended for (i.e. Speech, OT, Resource, Counseling, or special classroom modifications)? _____

▶ Learning Disability Yes No

▶ Presently has Individual Education Plan (IEP): Yes No

For New Students: The following materials are required to complete your *initial* application:

All Grades:

- Immunization Records
- Birth certificate
- Baptismal/Sacramental Certificates if applicable (All Grades)

Grades 1-7

- Most recent report card

Grades 4-7

- Standardized Testing Scores

Pre-Kindergarten and Kindergarten

- Early Elementary Screenings i.e. Child Outreach