

Prince of Peace Catholic School

Application for Admission

2023-2024 School Year

Phone: 563-242-1663

Fax: 563-243-8272

Section	11. St	udent informat	tion – (complet	e one app	nication p	er student)
Full Name) :					
	Last		First		Middle	
Date of Bi	rth:			Gender:	☐ Male	☐ Female
2023-202	4 Grade Level:		Current Scho	ool/Preschool	ol:	
Date of A	oplication:	Re	equested Start Dat	e:		Or AS SOON AS POSSIBLE
Parents	s/Guardians -	- Contact #1	☐ Has Custo	ody	☐ Lives	With
Name:						
	Last		First		Relations	ship to Student
Address	Street Address			Ana	artment/Unit #	
	Sileel Address			Ара	artineni/Onit #	
	City			State		ZIP
We use text and email as our primary means of communication Cell Phone #			Work Phone #			
Email:						
Parents	s/Guardians -	- Contact #2	☐ Has Custo	odv	☐ Lives	With
Name:				,		
rtarrio.	Last		First		Relations	ship to Student
Address	0: :					
	Street Address			Ара	artment/Unit #	
	City			State		ZIP
We use text and email as our primary means of communication Cell Phone # World				Work Phor	ne #	
Email:						
	2 Education	nal/Behavioral	History			
			_	10	V	D.N.
			pended from a sch	1001?	Yes	□ No
<u>If</u>	yes, please exp	ain:				
Has this student ever repeated a grade? ☐ Yes ☐ No						
<u>If</u>	<u>yes, please exp</u>	ain:				
Has this student participated in educational support program or special education services? ☐ Yes If yes, please ☐ 504 Accommodation ☐ IEP ☐ ESL/ELL ☐ Speech/Language ☐ No specify: ☐ Title I Reading ☐ Title I Math ☐ Other Reading or Math Support						

Section 3.	Student	Demograph	ics					
Is this student Hispa	anic or Latino	o? 🗆 Yes	□ No					
Race – mark all □ that apply		Black or frican American		□ American Indian/ Alaskan Native	☐ Native Hawaiian/ Pacific Islander			
Religious Denomina	ation:		Member o	of Prince of Peace C	hurch? ☐ Yes ☐ No			
Does this student ha	ave any spec	cial medical, he	alth, or dietai	ry concerns?	Yes □ No			
If yes, please explain:								
Please list anything else that you think is important for us to know about this student:								
Coeffor 4	A al al!4! a .							
Section 4.	Additio	nal Informati	on					
Has a current family	talked to yo	ou or encourage	d you to app	ly to Prince of Peace	e Catholic School?			
☐ Yes	□ No	If yes, which t	family?					
How did you hear about Prince of Peace Catholic School? Please check all that apply.								
□ Newspap	er 🗆	Mailing	☐ Billboard	☐ Web Search	☐ Realtor			
☐ Chamber	of Commerc	ce 🗆 Frie	nd or Family	Member □ Other:				
Diago return	this com	alatad Applia	ation for A	dmission to the	school office			

Please return this completed Application for Admission to the school office.

Upon receipt of these materials, a meeting may be set with Prince of Peace Catholic School's Principal or Assistant Principal. We encourage all families to set a meeting with an admissions representative and to tour our campus. To schedule a meeting and tour, please contact:

> Nate Vander Bleek, Advancement & Admissions Director Phone: (563) 242-1663 Email: nate.vanderbleek@prince.pvt.k12.ia.us

Additional materials may be requested from the student's family and/or the student's current or previous schools prior to an admission decision.

Thank you for your interest in Prince of Peace Catholic School!

Office Use Only Application Received					
ESA/FA/1040	NV				
Recs Requested	SR				
Recs Received	SB				
FA Confirmed	SB				
Admission	SR				
	JB/SB				

Phone: 563-242-1663

Fax: 563-243-8272