

#### Notre Dame Catholic Schools System (Notre Dame Jr/Sr High School) A Member of the Roman Catholic Diocese of Syracuse International Application Form for Admission 2020-2021

(Circle One)

Student Name	First	Middle	DOB	Place of Birth
Last	First	Middle		
English Name		Male	Female	
nternational Address:			Student E-	-mail Address
address				
City		Pro	ovince	Zip
deligion				
arental Information:				
Mother's Information: Mother's Name				
Address		City	Province	Zip
Iome Phone	Cell Phone		Wo	rk Phone
Email address				
ather's Information: Father's Name				
address		City	Province	Zip
Iome Phone	Cell Phone		Wo:	rk Phone
mail address				
agency (US) Information:				
agency Name		Contact Person	1	
Phone Number		Email address_		
<b>Iost Family (U.S.) Information:</b> Name(s)_			Email address	
Address		City	State_	Zip
Home Phone	Call Dhana		W	uls Dhono

Student's Name:			
Medication:			
Is the student currently taking medications? _	YesNo. If yes, please specify: _		
Does the medication need to be administered of	during the school day? Yes No.	If yes, when?	
<b>Emergency Contacts</b>			
Name	Relationship		
Home Phone	_ Work Phone	Cell Phone	
Name	Relationship		
Home Phone	_ Work Phone	Cell Phone	
Agency Contact:			
Name of Agency	Tame of AgencyContact Person		
Work Phone	_ Cell Phone	Email	
All tuition and fees for the 2020-2021 school	l year must be paid in full by August 15,	2020 and are non-refundable.	
Uniforms must be purchased separately. To purchase.	he price will vary (\$200-\$300) depending	on the quantity of uniforms the student wishes to	
I/We have read the tuition and paym whose name is on this application for the 2020		ble to make tuition and fee payments for the student	
	urate or incomplete information during the a	notional limitation known by the parents that could application process will result in non-acceptance or	
I understand that the Student Handle	book contains the official policies and proce	dures of the school.	
Mother/Guardian's Signature		Date	
Father/Guardian's Signature		Date	



## NOTRE DAME JUNIOR/SENIOR HIGH SCHOOL FAMILY EMERGENCY INFORMATION MEDICAL RELEASE

Please list below the names and grade level of all your children who will be attending Notre Dame for the 2020-2021 school year.

STUDENT NAME (first and last name	e) GRADE LEVEL
PLEASE COMPLETE THE FOLLO	OWING FOR EMERGENCY USE:
	friends who will assume temporary care of your ou or someone who would know where to reach you
1. Name:	Phone:
2. Name:	Phone:
PLEASE COMPLETE THE FOLLO	OWING FOR A MEDICAL EMERGENCY:
	en Notre Dame Junior/Senior High School is unable given to any of the above named children by a
Parent/Guardian Signature	Date
Preference for hospital:	
Family Physician:	Phone:
Allergies, Physical Handicaps, Medical Co	onditions
Child's Name	Condition



# NOTRE DAME HIGH SCHOOL ROY KANE, EXECUTIVE PRINCIPAL

## **Textbook Request**

Family Name:		
Address:	Phone	o:
City	State	Zip
Residing in:		Public School District
Attending		School
Student's Name:		Grade
textbooks required for to act as my agent in t This authorization sha I expressly revoke it in I understand that all be	quest that the above-mentioned school his/her/their education and hereby a he implementation of this request.  All remain in effect while my child(remain) writing.  Books loaned to my child(rem) are to be a responsible for the loss or excession.	en) are attending this school, unles
Signature of Parent or	Guardian	Date



### NOTRE DAME HIGH SCHOOL ROY KANE, EXECUTIVE PRINCIPAL

### **Transportation Request**

Complete this form only if you are requesting transportation for the coming school year.

Family Name:		
Address:	Phon	e:
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
This is to certify that I hereby appoint authorized representative to request trans Act for the students mentioned above.		
This authorization shall remain in effect vI expressly revoke it in writing.	while I have my child(ren) in attendance	at this school or unti
Signature of Parent or Guardian	Ī	Date

Note: The school must present this request to the public school district by April 1. It is imperative that this signed form be returned to the school no later than Friday, March 27.



### **PHOTO RELEASE FORM**

I hereby give my consent to Notre Dame Schools to photograph, film, videotape and then use, reproduce, and publish said images of me and/or my child/children.		
(Please print name)		
(Please print child's name)		
<ul> <li>I hereby release Notre Dame Schools the right to:</li> <li>Share images of me and/or my child/children on the organiz media pages, or printed material</li> <li>Distribute images of me and/or my child/children to media or</li> </ul>		
Signature	Date	
Signature for minor child		
Organization		
Address		
	Internal Use Only Date Filed Initials	



# THE CATHOLIC SCHOOLS OF THE DIOCESE OF SYRACUSE AND NOTRE DAME JR /SR HIGH SCHOOL

## NOTRE DAME HANDBOOK/CODE OF CONDUCT AGREEMENT AND AGREEMENT FOR INTERNET ACCESS BY STUDENTS

#### \*HANDBOOK/CODE OF CONDUCT AGREEMENT\*

- 1. I have read the Document entitled "Notre Dame Jr./Sr. High School Handbook and Code of Conduct (hereafter, the Handbook/Code of Conduct) found in the student agenda/planner book.
- 2. I understand and agree to comply with the policies, rules, and procedures proscribed in the Handbook/Code of Conduct.
- 3. I further understand that my failure to comply with such policies, rules and procedures will result in penalties as described in the Handbook/Code of Conduct.

#### \*INTERNET AGREEMENT\*

- 1. I have read the section of the Handbook/Code of Conduct entitled "TERMS AND CONDITIONS FOR ACCEPTABLE USE OF THE INTERNET BY STUDENTS" (Hereafter the "TERMS AND CONDITIONS") found in the Handbook/Code of Conduct portion of the student agenda/planner book.
- 2. I understand and agree to abide by the TERMS AND CONDITIONS. I understand and accept that I will be held accountable for consequences of any violation of the TERMS AND CONDITIONS in accordance with the provisions stated in that document.
- 3. I understand that any access to the Internet, whether in school or through remote connections, is provided to me solely for educational purposes.
- 4. As a user of the Catholic School network, I agree to comply with all applicable rules of the Catholic Schools of the Diocese of Syracuse and with all state and federal laws and restrictions and to communicate over the network in a responsible manner.

1,	Student's Name
	(Please Print)
	Student's Signature
2.	Student's Name_
	(Please Print)
	Student's Signature
3.	Student's Name_
	(Please Print)
	Student's Signature



As the parent/guardian of the student(s) listed on the reverse, I acknowledge that my child/children and I have read and understand the Notre Dame Jr./Sr. High School Handbook/Code of Conducts as found in the student agenda/planner book. I understand that my child/children are expected to comply with the rules, policies, and procedures contained in the Handbook/Code of Conduct and that failure to do so will result in penalties as proscribed by the Handbook/Code of Conduct.

In addition, as the parent/guardian of the above student(s), I grant permission for my daughter(s) and/or son(s) to access networked computer services such as electronic mail and the Internet. I understand that my child/children may be held liable for violations of the TERMS AND CONDITIONS and/or applicable laws. I also understand that some materials on the Internet may be objectionable, but I accept responsibility to provide guidance regarding Internet use and to set and convey standards for my daughter(s) and/or son(s) to follow when selecting, sharing, or exploring information and media. As parent/guardian, I agree to discuss the appropriate use of electronic media with my child/children and to insure that she/he or they understand(s) the TERMS AND CONDITIONS. I acknowledge that my child's/children's access to the Internet through facilities at the Catholic Schools of the Diocese of Syracuse may be summarily revoked in the event of a breach of the TERMS AND CONDITIONS. Finally, if my child/children is/are not sufficient age and maturity to sign above, I also certify that I have read the TERMS AND CONDITIONS to my child/children, and that my child/children understand them and agrees to abide by them.

Parent/Guardian:	
(Please Print)	
Parent/Guardian Signature:	
Date:	_
FAMILY NAME:	
(Please Print)	
Address:	
City, State, and Zip:	

SCHOOL YEAR: 2020-2021