## **APPLICATION FOR ENROLLMENT Kindergarten - Eighth Grade**

Marquette Catholic School • 1519 South Quincy • Tulsa, OK 74120 • (918) 584-4631
Pete Theban, Principal • pete.theban@marquetteschool.org
Msgr. Daniel H. Mueggenborg, Pastor



FAMILY NAME					Note: Prim	ary addres	s will be used for all sc	hool correspondence
PRIMARY STREET ADDRESS				CITY/STATE			ZIP	
PRIMARY HOME PHONE		PAR	ENT INFO	RMATIO	ON —			
Child/Children live v								r)
Do both parents have	legal access?	Yes	No Cus	stodial parent	is required t	o provide tl	ne school a copy of any i	relevant court decrees.
FATHER:1	Married1	Divorced	Single	FATHER EM.	AIL			
FIRST NAME	LAST N	JAME		OCCUPATIO!	N		WORK PHON	NE
RELIGION	CHURC	CH ATTENDING		EMPLOYER			CELL PHONE	
MOTHER:	Married	Divorced	Single	MOTHER EM	IAIL			
FIRST NAME	LAST	JAME		OCCUPATION	N		WORK PHON	NE
RELIGION	CHURC		DENT INFO	EMPLOYER )RMATI	ON —		CELL PHONE	
FIRST NAME	MIDDLE		LAST NAM		GENDER	AGE	GRADE DESIRED	DATE OF BIRTH
	BAPT	ISM	RECONCILA	TION	COMM	UNION	LAST SCHOO	L ATTENDED
FIRST NAME	MIDDLE	NAME	LAST NAM	МЕ	GENDER	AGE	GRADE DESIRED	DATE OF BIRTH
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FIRST NAME	MIDDLE	NAME	LAST NAM	ME	GENDER	AGE	GRADE DESIRED	DATE OF BIRTH
	BAPT	ISM	RECONCILA	TION	COMM	UNION	LAST SCHOO	L ATTENDED

## **MISSION STATEMENT**

## **Application Questionnaire**

This questionnaire is part of the procedure for admissions to Marquette Catholic School. Answering the following
questions will help the school administration and teachers better understand your child(ren) and ensure the best
educational environment for him/her(them). Please answer questions for each child applying for admission.

A developmental assessment is required for all students entering Kindergarten. Placement tests are given in reading

an	d mathematics for new students entering grades 1-8. These tests are administered by individual appointment.
1.	Please list all educational experiences of your child. Please include regular school placement, gifted and talented, home-schooling, special services, Individualized Education Plans (IEP), tutoring, etc.
2.	How would you describe your child's academic performance? Please list and explain any learning and/or academic problems your child has experienced. Explain recommendations and help received regarding these issues.
3.	Has anyone ever recommended that your child repeat a grade? What was the final outcome of the recommendation?

4.	Please list and detail all previous evaluations or testing (eg. educational, psycho-educational, psychological, etc.). A copy of any such assessments should be provided to Marquette Catholic School.
5.	Please list any medical, developmental, and/or psychological problems and treatment (including medications) your child has experienced. Please include diagnosis of ADD/ADHD, Tourette Syndrome, and physical or mental disabilities, etc. Please explain whether these have affected your child's educational progress and in what ways.
6.	Please list and explain any adjustment and/or behavior problems your child has demonstrated. Please also explain recommendations and help received regarding these issues.
7.	Please list and describe your child's strengths and any other comments you wish to make so that we may better understand your child.

Is your family interested in After-Sch	nool care?Yes	No	
APPLICATION AGREEMENT			
In applying for admission to Marque child(ren). I further understand the scentrollment. I will be notified by the scentrollment.	chool's acceptance of this application	on and supporting information does i	
If my children are admitted to Marqu regulation as defined in the Parent/St		esponsibility of supporting the school	l policies and
I further agree to honor my financial of	obligations to the school in a timely	manner according to school policies	an procedures.
Parent Signature		Date	
raiem Signature		Date	
Marquette Catholic School does not a color, ethnic origin, or gender. Marqued Education annual demographic information describes your child/children.	uette Catholic School is required to	provide the Oklahoma State Departs	ment of
White/Caucasian	Hispanic/Latino	Asian/Pac	cific Islander
Native American	Black/African America	an Multiracia	ıl
Please drop off or mail completed ap	plication to:Marquette Catholic Sch Attention: Adn 1519 South Qu Tulsa, Oklahor	nissions nincy	
Please see enclosed page for Admissi	ions Policy.		
		For Office Use Only:	
		Query Date:	
		Application Received:	
		Interview Date:	

Placement Date:
Admissions Decision: