



ITEMS REQUIRED FOR STUDENT FILE

Student Name: _____

School Year: _____

Grade: _____

	(Office Use) Received Y/N
• Original Alabama Blue Immunization Form	Y/N
• Copy of Birth Certificate	Y/N
• Copy of Baptismal Certificate (for Catholic students)	Y/N NA
• *Enrollment Contract & Diocesan Policies Forms	Y/N
• *Subsidy Form (Grades K-8)	Y/N
• *AUP Form	Y/N
• *Department of Health Letter	Y/N
• *Transcript Release 1 (1 st -8 th Grades only & if transferring from another school)	Y/N NA
• *Parent Observation Form	Y/N
• *Student Evaluation Form	Y/N
• Registration Fee (nonrefundable)	Y/N
• FACTS Tuition Review Page (See directions on attached.)	Y/N
• RenWeb/FACTS SIS Information to be completed in summer	Y/N

***Items denoted with an asterisk are available on school website.**

Please return this sheet to the school office along with all required documents and registration fee.



ENROLLMENT CONTRACT

Family Name: _____

Student Name(s)	Grade
_____	_____
_____	_____
_____	_____
_____	_____

My signature on this document obligates me for full tuition and fees. This contract is made with the understanding that the school reserves the right to request the withdrawal of any student who does not meet its academic requirements or fails to conform to its rules and regulations. Tuitions and fees are itemized on the school profile.

I accept and assume responsibility for all financial obligations. I understand that no student will be permitted to take semester and/or final exams unless all tuition and fees are paid in full. Neither report cards nor transcripts will be completed or released until all financial obligations have been met. Payments received after the 15th of the month will be considered delinquent and be subject to a \$25.00 late fee.

It is understood that a student is enrolled for the entire school year. The fact that the tuition is payable in monthly installments does not constitute a partial contract. There is an obligation to pay full tuition and fees without reduction or remission for absence and/or voluntary withdrawal of a student unless enrollment is withdrawn on or before **May 1st**. Exceptions will be made for families transferring out of the city. If a student is expelled from Prince of Peace Catholic School, financial obligations will cease on the day of expulsion, provided the student’s account is current and up to date.

Parents who are in a divorce or a separation situation are hereby notified that both parents will be treated equally unless there is a court order or written document to the contrary in the student’s file.

My signature also authorizes Prince of Peace Catholic School, the Diocese of Birmingham in Alabama, and their representatives to display, to publish, and to reproduce photos/videos of my child for promotional materials. I understand that the promotional materials may be used for internal, diocesan, community, and/or national publications that promote the mission of our local Church and school.

Signature of parent/guardian responsible

Date

Signature of person financially responsible

Date



POLICIES OF THE CATHOLIC SCHOOLS – DIOCESE OF BIRMINGHAM IN ALABAMA

Application for registration implies good will on the part of parents in complying with the philosophy of regulations of Catholic Schools, Diocese of Birmingham, Alabama (see Handbook of Policies).

“Every Catholic elementary and secondary school in the school system of the Diocese of Birmingham admits students, without regard to sex, race, color, or national origin, to all the rights, privileges, programs, and activities generally accorded to or made available to students of the schools. Schools do not discriminate on the basis of sex, race, color, or national origin in employment practices, administration of educational policies, admission and treatment of students, scholarship programs, or athletic and other school administered programs.”

It is also our right and duty to decline the application of students who do not meet our behavioral standards.

Prior to admission, all new students must present previous report cards or records and present birth or baptismal record for proof of age.

Children entering Kindergarten must be five years of age by September 1st of the academic year. Children in first grade must be six years of age by September 1st of the academic year. Proof of age must be presented at time of application, and it will be subject to verification.

Since this is a Catholic school, curriculum requirements call for students to participate in religion classes. During the school year, students are required to attend specified religious activities or services.

Any information on the application form which is later found to be erroneous could be cause for nullification or immediate dismissal of a student.

Parent's Signature



Prince of Peace Catholic School
Tuition Subsidy Eligibility Certification

Prince of Peace Catholic Parish is very blessed to have a school where the Catholic stewardship way of life is taught and lived daily. Prince of Peace School is part of the formation ministry of our parish, and the parish subsidizes (provides financial support to) it. Part of this subsidy includes a tuition reduction of almost 25% to Catholic families who are registered parishioners, attend Mass regularly, and who financially support our parish.

Please indicate which statements apply to your family:

_____ Our family is registered at Prince of Peace Catholic Church and regularly attends Mass.

_____ Our family is registered at Prince of Peace Catholic Church, *but not active*.

_____ Our family financially supports the parish in accordance with our ability to pay, in a demonstrable manner (weekly offertory envelopes or electronic giving), at a minimum of one percent of our annual income.

_____ Our family is not Catholic and is not requesting parish subsidy.

Parent Signature

Date

PLEASE PRINT family name here: _____

To apply for the parish tuition subsidy, complete the form below and follow the instructions that apply to your family.

POP registered parishioners – The school office will submit your completed verification form below to the church office for approval.

Catholic non-POP parishioners – Have your parish priest approve and affix his parish seal to the verification form below. Then, return to the school office.

Our family requests the parish tuition rate for the ____/____ school year:

Family last name: _____ First Names: _____

Address: _____

City, State ZIP: _____

Pastor's Signature: _____

Parish financial manager's signature: _____

Parish seal:



AUP for STUDENTS & PERMISSION FOR PUBLICATION/PHOTO RELEASE

Dear Parents/Guardians of POP Students,

We are excited to provide expanded opportunity to our students to learn and grow through the use of technology. To protect our students while online, the school has filter software in place; however, access to the internet may be unsafe. We require that all students adhere to the guidelines below in order to preserve their privilege to explore the world through computer technology at school.

Sincerely,
Connie Angstadt, Principal

Acceptable Use Policy

I understand I must follow the policy for using technology that is included in the student handbook/calendar. I understand the use of school technology equipment is a privilege that can and will be revoked because of my misconduct. I also understand I am responsible for completing assignments that require the use of computer technology both in and out of school, as assigned. I agree to conduct myself in the following manner. I will:

1. Follow proper procedures while using or moving technology equipment on school grounds.
2. Only operate the computer assigned to me during lab/class time and will not interfere with equipment or computer work belonging to or being used by others.
3. Not remove, add, copy or make changes to the appearance or function of software or hardware unless instructed to do so by a staff member.
4. Keep private ALL login and password credentials – AT ALL TIMES.
5. Work as directed when using all forms of technology at Prince of Peace Catholic School.
6. Adhere to the policies set by the school regarding misuse of property and inappropriate behavior – including cyber-bullying*.
7. Visit only approved sites while online, without logging on to personal accounts without permission.
8. Respectfully share technology related information to assist and protect others.
9. Keep food and drink away from computer technology.
10. Use Guest WIFI access only under the direction of a staff member, and only with permission.

*Cyber-bullying is bullying (as defined in the school handbook) by ANY electronic means.

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

Parent/Guardian Agreement:

I understand and agree that my child, _____ is responsible for adhering to these rules in order to use school technology equipment. I understand that loss of such privileges or failure of personal computing equipment does not exempt my child from completing assignments.

Again, the security of your child is our top priority. We never identify students by name on our website. However, we want to be able to share pictures of your child engaged in learning and extension activities that promote our mission with you and our community. We would like permission to use photos, videos, and sound recordings of your child for this purpose. I DO _____ DO NOT _____ give permission for this purpose.

Parent Signature: _____ **Date:** _____



DEPARTMENT OF HEALTH LETTER

Dear Parent or Guardian,

Each year the Jefferson County Department of Health conducts an audit of student educational records to ensure that children enrolled in school in Jefferson County are protected from vaccine-preventable diseases or have a valid exemption from vaccination. Documentation of vaccinations and medical examinations is annotated on the Alabama Certificate of Immunization (blue form). Valid exemptions from immunizations may also be annotated on the Alabama Certificate of Religious Exemption. During the course of the audit, local health department employees will check for appropriate vaccinations and a valid expiration date on the blue form or for an appropriate exemption form. No identifying information about the child is kept by the health department employees. If a child needs further vaccination or an updated certificate, the school will be notified at the completion of the audit.

The Family Educational Rights and Privacy Act mandates parental consent be obtained for persons not employed by your school to review the records of its students. If you do NOT wish for your child's record to be evaluated by health department personnel, please indicate by providing your signature in the appropriate space below.

Thank you for your assistance.
Sincerely,

Connie Angstadt, Principal
Prince of Peace Catholic School



_____ I **do** give permission to the Jefferson County Department of Health to review my child's vaccination record.

_____ I **do not** give permission to the Jefferson County Department of Health to review my child's vaccination record.

Child's Name: _____

Signature of Parent: _____

Date: _____



TRANSCRIPT RELEASE REQUEST

To Parent/Guardian: Please complete, sign and return to your child's current school or submit to POP.

To Current School: The following student has applied for admission to Prince of Peace Catholic School:

_____	_____
Student's Name	Student's Date of Birth
_____	_____
Student's Current School	Applying to Grade

Please send the following information to:

Prince of Peace Catholic School
Attn: Admissions
4650 Preserve Parkway
Hoover, AL 35226
(205)824-7886

- Transcripts from **completed** school years
- Most recent report card
- Any available standardized testing
- Any available special education records

I, _____ (parent or guardian), do hereby declare that I am legally responsible for the release of information concerning the above named student. I hereby request and authorize _____ (current school) to give in writing to Prince of Peace Catholic School copies of all records pertaining to the above named student upon receipt of this release.

_____	_____
Parent/Guardian Signature	Date



HOW TO CREATE A FACTS TUITION MANAGEMENT ACCOUNT

(Current POP School or Adventure Ark families do not need to enroll.)

- Go to www.popcatholic.net
- Choose Current Parents.
- Select FACTS Tuition under Tuition Portal.
- Create a username and password and follow instructions to create a new account for the applicable school year.
 - **Note:** Financial payment information is required for FACTS account setup.
 - **Process is complete when you see that your account is “pending”.**

RenWeb/FACTS Student Information System (SIS) Instructions

(Current School families may skip to last step.)

- Go to www.popcatholic.net
- Choose Current Parents.
- Click RenWeb (FACTS SIS) account.
- Enter preferred email address and click create an account. An email will be sent with the FACTS SIS link. **Link is valid for 6 hours only.**

Note: New families may not be able to activate RenWeb FACTS SIS accounts until the conclusion of the prior school year.

- Follow the emailed link to create Family Portal login.
- A web browser displays your Name and RenWeb person ID.
- Enter a username, password, and confirm the password.
- Save username and/or password.
- Log into the Family Portal using newly created credentials.
- Go to School Information, select Web Forms. **Family Demographic Forms** will appear on the right. Click to begin entering information: family, student, emergency, medical, etc.
 - **Note:** You must save each page individually to avoid losing any data entered.