

STUDENT APPLICATION

Applying for School Year 20__ to 20__

Circle program of choice:



ST. URSULA VILLA

School Phone (513) 871-7218 FAX (513) 871-0315

3660 Vineyard Pl. Cincinnati, OH 45226

www.stursulavilla.org

TODDLER PROGRAM			
2-Year-Old 2-Day Mornings 8:00 – 10:45 a.m. (Mon & Tues)		2-Year-Old 2-Day Mornings 8:00 – 10:45 a.m. (Thurs & Fri)	
MONTESSORI PROGRAM			
3-Year-Old 3-Day Half Day (T,W,Th)	3-Year-Old 5-Day Half Day		4-Year-Old 5-Day Half Day
3-Year-Old 3-Day Half Day plus lunch	3-Year-Old 5-Day Half Day plus lunch		4-Year-Old 5-Day Half Day plus lunch
3-Year-Old 3-Day Full Day (T,W,Th)	3-Year-Old 2-Day Half Day (M,F) 3-Day Full Day (T,W,Th)	4-Year-Old 3-Day Full Day (T,W,Th)	4-Year-Old 2-Day Half Day (M,F), 3-Day Full Day (T,W,Th)
	3-Year-Old 5-Day Full Day		4-Year-Old 5-Day Full Day
Montessori Kindergarten (current Montessori students)			
TRADITIONAL PROGRAM			
3-Year-Old 3-Day Half Day (T,W,Th)	3-Year-Old 5-Day Half Day		4-Year-Old 5-Day Half Day
3-Year-Old 3-Day Half Day plus lunch	3-Year-Old 5-Day Half Day plus lunch		4-Year-Old 5-Day Half Day plus lunch
3-Year-Old 3-Day Full Day (T,W,Th)	3-Year-Old 2-Day Half Day (M,F), 3-Day Full Day (T,W,Th)	4-Year-Old 3-Day Full Day (T,W,Th)	4-Year-Old 2-Day Half Day (M,F), 3-Day Full Day (T,W,Th)
	3-Year-Old 5-Day Full Day		4-Year-Old 5-Day Full Day

Grade: **KINDERGARTEN** 1 2 3 4 5 6 7 8

Applicant Name		Male Female		Nickname, if any	
Home Address		City/State/Zip			
Home Phone		School District		Date of Birth	
Current School		Current School Address/Phone			
Current Grade	Religious Affiliation		Parish, if Catholic		
Applicant lives with (check all that apply) ___ Father ___ Mother ___ Other (please indicate)					
List siblings currently enrolled at St. Ursula Villa:					
Name:		Grade:		Name:	
				Grade:	
List other siblings:					
Name:		Date of birth:		Currently enrolled at:	
				Grade:	
Parent/Relationship to Student			Parent/Relationship to Student		
Home Address (if different from applicant)			Home Address (if different from applicant)		
Home Phone		Cell Phone		Home Phone	
				Cell Phone	
E-Mail			E-Mail		
Occupation/Title			Occupation/Title		
Business Name			Business Name		
Business Address			Business Address		
Business Phone			Business Phone		
SUV Alumnus ___ No ___ Yes, Class of _____			SUV Alumnus ___ No ___ Yes, Class of _____		
Person(s) financially responsible for applicant					
How did you learn about St. Ursula Villa?					
What other schools did you consider and why?					
Signature and Date (Parent 1/Relationship to Student)			Signature and Date (Parent 2/Relationship to Student)		

A non-refundable \$75.00 application fee must accompany this form (if check, make payable to St. Ursula Villa.)

Non-discrimination policy: St. Ursula Villa of Cincinnati, Inc. admits students of any race, color, gender, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. St. Ursula Villa of Cincinnati, Inc. does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, scholarship, athletic, and other school-administered programs.

FOR ADMISSIONS USE ONLY	DATE RECEIVED	/	/	CHECK NO.	CHECK AMOUNT	INITIALS
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