



A NativityMiguel School

**APPLICATION
FOR
ADMISSION
2010 – 2011**



**Transforming Lives Toward
Personal Excellence**

**Main Office: 203-772-2424
Fax: 203-772-2425**

**208 Columbus Avenue
New Haven, CT 06519**



Thank you for your interest in St. Martin de Porres Academy. We are a faith based NativityMiguel middle school that provides tuition free, extended day education for underserved girls and boys from low-income families in the greater New Haven area. We are an independent Catholic school committed to a belief in the dignity and worth of every person. We strive to provide each child with a promising start in life and to equip them to fulfill their academic potential while achieving spiritual and social maturity. We welcome children of all faiths, races and cultures.

In order to be considered for admission, a child must:

- Come from a family of low income, limited resources and be at risk of not achieving their potential
- Have the ability to learn without special services
- Be free of serious emotional and behavioral problems that disrupt life in the classroom
- Have one committed adult who will support the child in their educational endeavors at Saint Martin de Porres Academy & beyond
- Possess the desire to be their best self

The Admissions Process consists of four steps:

- Complete the application and mail it to the school with your \$35.00 nonrefundable application fee (cash, money order or credit card – no personal checks will be accepted).
- Once the application has been received, we will contact you to schedule an interview and tour.
- After the interview with you and your child, we will contact you to schedule a shadow day.
- Finally, your child will need to complete the entrance exam (date TBA).

Students will be notified of their acceptance by the end of May. If you have any questions or concerns about the application process, please contact the school at 203-772-2424.

Sincerely,

Handwritten signature of Kelly O'Leary in black ink.

Kelly O'Leary
Principal

Handwritten signature of Jay Bowes in black ink.

Jay Bowes
President

Handwritten signature of Allison Rivera in black ink.

Allison Rivera
Vice President



APPLICATION FOR ADMISSION
Student Information

Student's Name: _____
First Middle Last

Street Address: _____

City, State, Zip Code: _____

Home Phone: (____) _____ *Cell Phone:* (____) _____

Date of Birth: _____ *Age:* _____ *Sex:* M ___ F ___
Month Day Year

Current School: _____

School Address: _____

School Phone Number: (____) _____ *Current Grade:* _____

Principal: _____ *Entering Grade:* _____

Other Schools Attended:

<i>Name of School</i>	<i>Grade</i>	<i>Dates Attended</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

How did you hear about St. Martin de Porres Academy?

Religion: _____

Parish/Church: _____



Family Information

MOTHER or GUARDIAN

FATHER or GUARDIAN

Name: _____

Relationship to student: _____

Occupation: _____

Employer: _____

Home Phone: _____

Work Phone: _____

Address (if different than child's):

Student lives with _____ Relationship: _____

Home phone: _____ Alternate phone: _____

Brothers/Sisters:

<i>Name</i>	<i>Age</i>	<i>Grade</i>	<i>School</i>

Ethnic background (optional): Please identify your ethnic background/origin.

Asian Latino Caucasian African American Other: _____

***Please Mail These Forms & A RECENT PHOTOGRAPH OF YOUR CHILD TO:
St. Martin de Porres Academy • 208 Columbus Avenue • New Haven, CT 06519***



Financial Information

St. Martin de Porres Academy is a tuition-free school that seeks to enroll young people from low-income families in the Greater New Haven Area. Therefore, family income is one of the most important factors in the admissions decision.

Number of dependents in the family_____

Annual family income_____

Social Security # (if available) _____

Does your child qualify for the Federal Free and Reduced Breakfast and Lunch Program for this school year?

_____ Did not participate

_____ Free

_____ Reduced

Please note that while the school is tuition-free, each family will be charged \$25 per month activity fee per student.

Please submit ONE of the following with your application:

- a. Your most recent Federal Income Tax Return (Form 1040 or 1040A)
- b. A letter from Social Security Office stating the amount of your Social Security or Supplemental Security Income (SSI)
- c. A letter from Aid to Families with Dependent Children (AFDC) stating the amount you receive
- d. Provide a personal statement of income

**Does your family have ongoing expenses that affect your family income?
(For example: medical expenses, tuition expenses, child support payments etc.)**

For Office Use Only

_____ Application	_____ Shadow Day	_____ Interview	_____ Testing	_____ Income Info
_____ Student Transcripts	_____ Medical Records	_____ \$35.00 Application Fee		



Educational Information

In order to better support your child if he/she is accepted, please complete all of the following:

Does your child receive any school-related support services?

If yes, please check those that apply:

Counseling (in school) Resource Room Speech/language therapy
 Counseling (outside school) ESL Title 1 Remedial Math
 Title 1 Remedial Reading Other (please specify) _____

Please describe any specific circumstances which have affected your child's performance in school. (For example: Illness or physical handicap, particular learning difficulties, family circumstances, frequent changes in home or school.) Please include documentation concerning any special testing your child may have had.

Is there any illness or disability that impacts the student's studies or participation in school activities such as physical education? Yes No

If yes, please indicate what they are (asthma, dyslexia, etc.) and explain.

Does the student wear glasses? Yes No

Approximately how many days has the student been absent from school in the past two years? _____
Please explain.

List any activities/sports/clubs in which the student is currently a participant.

Primary language spoken at home: _____

Language(s), other than English, that student reads and writes: _____
