

# Application for Admission



**Reminder: Return this application, with a \$20.00 application fee, to the Admissions Office at Saint John's High School.**

**Please print or type all entries.**

**SAINT JOHN'S HIGH SCHOOL**  
378 Main Street, Shrewsbury MA 01545  
508 842-8934 ext. 266

[www.stjohnshigh.org](http://www.stjohnshigh.org)

Application to:  Grade 9  Grade 10  Grade 11  Grade 12 Year of Graduation \_\_\_\_\_

Student Name \_\_\_\_\_  
(Legal) last name first name middle name

Address \_\_\_\_\_  
street city / town state zip code

Phone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Place of Birth \_\_\_\_\_

Present School \_\_\_\_\_ Grade \_\_\_\_\_  
name address

Religious Denomination \_\_\_\_\_ Parish or Congregation \_\_\_\_\_

Student email (Optional) \_\_\_\_\_ Parent email \_\_\_\_\_

Father's Name (Mr. / Dr.) \_\_\_\_\_ Mother's Name (Mrs. / Dr.) \_\_\_\_\_

Home Address \_\_\_\_\_ Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Mother's Occupation \_\_\_\_\_

Company Name \_\_\_\_\_ Company Name \_\_\_\_\_

Business Address \_\_\_\_\_ Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Business Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Both Parents  Mother  Father  Other

Student resides with:

Name and Age of Brother(s) \_\_\_\_\_

\_\_\_\_\_

Paternal Grandparent(s) \_\_\_\_\_

address

Name and Age of Sister(s) \_\_\_\_\_

\_\_\_\_\_

Maternal Grandparent(s) \_\_\_\_\_

address

Relatives who have attended Saint John’s High School:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Years attended \_\_\_\_\_ to \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Years attended \_\_\_\_\_ to \_\_\_\_\_

Please list:

Awards \_\_\_\_\_ Sports Interests \_\_\_\_\_

Hobbies \_\_\_\_\_ Musical Instruments \_\_\_\_\_

Is there an illness, disability, or condition that may interfere with your studies or extracurricular activities?  Yes  No

If yes, please indicate and explain what may interfere with your studies or extracurricular activities (e.g., Asthma, Dyslexia, Learning Difference, ADD, Mental Health Issues, etc.)

Are you following an individualized education plan?  Yes  No

If yes, please explain \_\_\_\_\_

If you have not been attending the same school for the last three years, please indicate the grade(s) and school(s) you attended:

Grade \_\_\_\_\_ School Name \_\_\_\_\_ Location \_\_\_\_\_

Grade \_\_\_\_\_ School Name \_\_\_\_\_ Location \_\_\_\_\_

How did you find out about Saint John’s High School? \_\_\_\_\_

Why do you want to attend Saint John’s High School? (Please write – in your own handwriting – a short composition stating your reasons.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Note:** When returning this application for admission, please include a check for \$20.00 made payable to Saint John’s High School. The satisfactory completion of the present grade in a recognized public, private, or Catholic school is necessary for admission. Evidence of such satisfactory work will be required before final acceptance into Saint John’s High School. All transcripts should be mailed to: **Admissions Office, Saint John’s High School, 378 Main Street, Shrewsbury, MA 01545.**

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Father / Guardian’s Signature \_\_\_\_\_ Mother / Guardian’s Signature \_\_\_\_\_



# Financial Certification Form (for International Students)

Saint John's High School, 378 Main Street, Shrewsbury, MA 01545

The Financial Certification Form is used to determine your ability to meet the cost of attending Saint John's High School. The form is complete only when financial documentation (*e.g.*, letters from banks certifying availability of funds, letters of financial sponsorship) and other required documents are attached. According to US immigration regulations, Saint John's cannot issue Certificates of Eligibility – the I-20 – necessary to obtain F-1 visas unless applicants have been offered admission to Saint John's High School, and have submitted documented evidence of sufficient funds. If the necessary financial documentation is not on file in the Admissions Office, additional correspondence will delay the issuance of the Certificate of Eligibility and the process of obtaining the visa.

Please complete this form and return it with the required attachments to the Admissions Office. Please also attach 1) Verification of Medical Insurance while in the United States and 2) Host Affidavit of Support for providing room and board, supervision, transportation, etc. with host contact information and physical address (no post office box numbers).

This information is required in order to issue Certificates of Eligibility – the I-20. It is important for parents/guardians to understand that as a day school, Saint John's High School is not responsible for a student's living arrangements, room and board, transportation, medical cost, supervision or any other services beyond the educational services outlined in the Saint John's High School Descriptive Catalog. Parents/guardians must appoint and name on the back of this form a guardian with whom their son will reside while attending Saint John's High School.

## Estimated Expenses for Students for 2013–2014

The *estimated* expenses for nine (9) months for a student are \$31,500. This includes tuition and fees, medical insurance and living expenses.

Please complete all the items below. Type or print.

Student's Name (*exactly as it appears in passport*)

last (family/surname)

first

middle initial

Foreign Permanent Address

Country and City of Birth

Date of Birth

month/day/year

Country of Citizenship

## Visa Status

Which type of visa do you wish to apply for? \_\_\_\_\_

Have you studied in the US before?      Yes      No      If yes, when and where? \_\_\_\_\_

**If you are already in the US, please enter the information below:** (Please attach a copy of your I-94 form)

Visa Type \_\_\_\_\_

SEVIS ID number (on I-20) \_\_\_\_\_

Name and location of current school \_\_\_\_\_

Transfer release date from current school \_\_\_\_\_  
month/day/year

**Source of Funds** (documents should indicate the financial resources in US \$)

Scholarship/Funding

\_\_\_\_\_  
(attach award letters) \$ \_\_\_\_\_

Private Sponsors: Company, Foundation, etc.

\_\_\_\_\_  
(attach award letters) \$ \_\_\_\_\_

Personal and/or Family Funds

\_\_\_\_\_  
(attach bank statements) \$ \_\_\_\_\_

**TOTAL FUNDS**

(This amount should equal total estimated expenses) \$ \_\_\_\_\_

**Parent Certification**

I certify that US \$ \_\_\_\_\_ is available to me for my son's education at Saint John's High School. I understand that as a day school, Saint John's High School is not responsible for my son's living arrangements, medical costs, room and board, transportation, or any other services beyond the educational services outlined in the Saint John's High School Descriptive Catalog.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name and mailing address: (where your I-20 should be sent; no post office box numbers, please)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name, mailing address and telephone number of host family with whom the student will reside while attending Saint John's High School:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name, mailing address and telephone number of Placement Agent (if applicable):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_