**Regina Catholic Education Center**

**Application for Admission (Jr./Sr. High)**



2150 Rochester Ave

Iowa City, IA 52245

319.338.5436 / fax 319.887.3817

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|  |  |
| Last Name:        | Current School:        |
| First Name:        | District of Residence:       |
| Middle Name:       | County of Residence:       |
| Birth date:       | City :       | State:       |
| Sex: [ ]  M [ ]  F | Current Grade Level:       |
| Do you need busing | [ ]  Yes [ ]  No | Semester and Year Applying for:       |
| Date of Application:       | *(i.e. Spring 2019 or 2019-2020 School Year)* |
|  |
| **Parent/Guardian Contact #1** | **[ ]  Has Custody** **[ ]  Lives With** |
| First Name:        | Last Name:        |
| Address:        | Relationship:        |
| City:        | State:        | Zip:        |
| Email:        |
| Home Phone:        | Work:       | Cell:       |
|  |
| **Parent/Guardian Contact #2** | **[ ]  Has Custody [ ]  Lives With** |
| First Name:        | Last Name:        |
| Address:        | Relationship:        |
| City:        | State:        | Zip:        |
| Email:        |
| Home Phone:        | Work:       | Cell:       |
|  |
| **Educational/Behavioral History** |
| Has the student ever been expelled from a school?  |  [ ]  Yes [ ]  No | If yes, please provide an explanation in writing with application.  |
| Has the student ever repeated a course or grade?  |  [ ]  Yes [ ]  No | If yes, please provide an explanation in writing with application.  |
| **Support Programs or Special Education Services** |
| Has the student ever participated in any educational support programs or Special Education services?  |  [ ]  Yes [ ]  No | If yes, please specify: [ ]  504 Accommodation [ ]  IEP[ ]  Title I Math [ ]  ESL/ELL [ ]  Speech/Language[ ]  Title I Reading [ ]  Other Reading or Math Support  |

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| **Ethnicity** |
| Are you Latino or Hispanic? [ ]  Yes [ ]  No |
| **Race – mark all that apply** |
| [ ]  White[ ]  Black or African American  | [ ]  Asian[ ]  American Indian or Alaska Native [ ]  Caucasian (not of Hispanic origin) | [ ]  Native Hawaiian / Other Pac Islander [ ]  Caucasian (not of Hispanic o |
| **Home Language (Please mark the language used most often at home)** |
|  [ ]  English [ ]  Spanish [ ]  Other Is English your first language? [ ] Yes [ ] No Do you speak English fluently? [ ] Yes [ ] No |
| **Religious Affiliation** |
| Denomination       Parish       Pastor        |
| **Other Pertinent Information** |
| How did you hear about Regina?        |
| Was there a member of the Regina community who was instrumental in helping you to make the decision to send your student to Regina?  |  [ ]  Yes [ ]  No | If yes, please list that person’s name (one name only, please)        |
| Does your student have any special medical / health / dietary concerns about which we should know?  |  [ ]  Yes [ ]  No | If yes, please list the concerns       |
| Please add anything else that you think is important to help us know your student better (interests, etc.).        |
| In addition to this completed application, the following information is required to process this application:1. A one-page personal statement explaining why you would like to attend Regina.
2. Completed Request for Records form
3. $100 Registration Fee
4. A copy of the student’s most recent school report card and/or a transcript.
5. A copy of the student’s most recent standardized test scores.
6. A copy of your student’s current immunization record.

 Please submit this application and accompanying materials to: |
| Glenn Plummer, Principal Regina Jr/Sr High School 2150 Rochester Ave Iowa City, IA 52245  | glenn.plummer@regina.orgOffice: 319.338.5436Fax: 319.887.3718 |
| ***For Office Use Only*** |
| Accepted Date into District:  | Regina Student ID #: |
| Start Date: | State ID #: |