

January, 2012

Dear Parents/Guardians:

Thank you for your interest in School of the Incarnation. Enclosed please find the necessary materials to begin the application process. Please provide all forms and information requested on the application checklist for each child. *Incomplete packets will not be considered until all information is received.* Completed packets may be brought to the School Office Monday, January 30<sup>th</sup> through Monday, February 13<sup>th</sup> between the hours of 8:30 a.m. and 3:30 p.m. **Deadline for applications is Monday, February 13<sup>th</sup> at 3:30 p.m.**

If you are applying for preschool or kindergarten, please have your child's prior Preschool complete the enclosed Developmental Descriptors Inventory and return it to School of the Incarnation in the self-addressed envelope (please provide stamp). If your child does not attend preschool, the parent should complete the form and return it with the application.

Students entering grade 1-7 will be invited to participate in a school visit which will include an assessment of both math and reading/ writing skills. Invitations will be made based on the availability of seats at each grade level and will be given in order of priority as outlined on the Board of Pastors Application Criteria enclosed in the application packet.

Notification of admission decisions will be mailed the week of March 12<sup>th</sup>. If you have any questions, please contact the School Office at 410-519-2285.

Thank you for your interest in School of the Incarnation.

Sincerely,

Mrs. Lisa R. Shipley, M. Ed.  
Principal



# School of the Incarnation

## Parent/Guardian Checklist for Application Packet 2012-2013

In order to ensure the proper processing of your application, please use the following checklist to review your packet for completeness **BEFORE** returning it to the School Office.

Note: All applications **MUST** be returned by **3:30 PM on Monday, February 13, 2012** to School of the Incarnation, 2601 Symphony Lane, Gambrills, MD 21054.

Thank you for your cooperation and support of the School of the Incarnation.

### Checklist for Complete Application

Please check off the items as you complete and insert in the large envelope provided.

- Copy of the Child's Birth certificate
- Copy of child's Sacramental certificates
- Enrollment Application
- Family Parish Information (one copy or photocopy per child)
- Photo copy of both parent/guardian driver's license or military photo ID
- Developmental Inventory for preschool and kindergarten applicants only
- Copy of the 1<sup>st</sup> and 2<sup>nd</sup> quarter report cards for the current school year, standardized test scores for Grade 1-8 applicants
- If applicable, IEP/504 Plan. Additional evaluations (Speech/Language, Occupational, Educational/Developmental Assessments)
- Check for \$100 non-refundable application fee made payable to: "School of the Incarnation"

**Child's Name** \_\_\_\_\_

**Grade 2012/2013** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Work Phone** \_\_\_\_\_

**Email address** \_\_\_\_\_

Board of Pastors  
Application Criteria  
School of the Incarnation

**Registration for the School of the Incarnation begins January 28, 2012. As an inter-parish School, the Board of Pastors applies the same standards for evaluation and endorsement of applicants in each of the incorporating parishes. The following items are necessary for applications to the school to be endorsed as parish members. Please read this carefully before making application to the School.**

1. The family is registered with one of the following parishes

Church of the Holy Apostles, Gambrills  
Holy Family, Davidsonville  
Our Lady of Perpetual Help, Edgewater  
Our Lady of the Fields, Millersville  
St. Elizabeth Ann Seton, Crofton  
St. Joseph, Odenton

2. The family participates in weekly Liturgy and in various activities of the parish community
3. Registered families participate in sacrificial giving through the regular use of collection envelopes of their parish
4. The family supports the Catholic identity of the School and is committed to collaborative efforts with the Principal and the Administration
5. Both new applicants and current households will be certified by their pastor annually as meeting these criteria
6. Those who are not certified as parish members, but are admitted because of available seats will be assessed an out-of-parish tuition rate

Tuition assistance is available for “participating” parishioners and is provided through the School from a unified fund, not through individual parishes. Inquiries for tuition assistance should be made to the School Office.

**SCHOOL OF THE INCARNATION**  
**ENROLLMENT APPLICATION**

Child Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Name you wish child to be called at school \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Home telephone \_\_\_\_\_ Area/Neighborhood \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Gender  Female  Male Religion \_\_\_\_\_

Race:  Asian/Pacific Islander (P)  Black/African American (B)  Hispanic (H)

Multi-racial (M)  Native American (I)  White (W)

- Grade Fall 2012 Kindergarten – Grade 8 \_\_\_\_\_
- Grade Fall 2012 Preschool Options:
  - Full Day (8:30 AM to 3:30 PM, Monday thru Friday)
  - Half Day Morning (8:30 to 11:30 AM, Monday thru Friday)
  - Half Day Afternoon (12:30 to 3:30 PM, Monday thru Friday)

Current School \_\_\_\_\_

Current School Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**FAMILY DEMOGRAPHIC INFORMATION**

Father's Full Name \_\_\_\_\_ Religion \_\_\_\_\_

Father's Address \_\_\_\_\_

Father's Home Phone \_\_\_\_\_ Father's Day Phone \_\_\_\_\_

Home E-mail address \_\_\_\_\_

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

Father's Employer \_\_\_\_\_

Father's Work Address \_\_\_\_\_

Father's Work E-mail Address \_\_\_\_\_

Mother's Full Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Address \_\_\_\_\_

Mother's Home Phone \_\_\_\_\_ Mother's Day Phone \_\_\_\_\_

Home E-mail address \_\_\_\_\_

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

Mother's Employer \_\_\_\_\_

Mother's Work Address \_\_\_\_\_

Mother's Work E-mail Address \_\_\_\_\_

**-Please complete back side-**

Guardianship: Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Other \_\_\_\_\_

If other checked, please complete:

Guardians: \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Phone \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Work Address \_\_\_\_\_



SCHOOL OF THE  
INCARNATION

Family Parish Information

**APPLICANT INFORMATION:**

Child's Full Name \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_  
Number and Street

\_\_\_\_\_ City State Zip

\_\_\_\_\_ Date of Birth Place of Birth Social Security#

Religious Affiliation: \_\_\_\_\_

Sacramental Information:

Date Received Parish Address

Baptism \_\_\_\_\_  
Eucharist \_\_\_\_\_  
Confirmation \_\_\_\_\_

FAMILY INFORMATION:

Child's Father

Child's Mother

Name: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Religious Affiliation: \_\_\_\_\_

Name: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Religious Affiliation: \_\_\_\_\_

Please indicate: \_\_\_Married \_\_\_Single  
\_\_\_Deceased \_\_\_Other

Please indicate: \_\_\_Married \_\_\_Single  
\_\_\_Deceased \_\_\_Other

**-Please complete other side-**

With whom does child live? \_\_\_\_\_

Parish you attend: \_\_\_\_\_

Are you registered? \_\_\_\_\_ Yes \_\_\_\_\_ No

1. Does your child/children currently participate in Religious Education/Faith Formation or Children's Liturgy of the Word? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe:

2. Parent/family involvement in Parish Ministries (Please name: e.g. Eucharistic Minister, Greeter, Reader, Pastoral Council, Catechist, K of C, Bible Study, etc.)

3. Parent/family volunteer in Parish activities (Please name: e.g. Office help, Our Daily Bread Casseroles, Scouts, etc.):

Paternal Grandfather

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Please indicate: \_\_\_\_\_ Living \_\_\_\_\_ Deceased

Paternal Grandmother

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Please indicate: \_\_\_\_\_ Living \_\_\_\_\_ Deceased

Maternal Grandfather

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Please indicate: \_\_\_\_\_ Living \_\_\_\_\_ Deceased

Maternal Grandmother

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Please indicate: \_\_\_\_\_ Living \_\_\_\_\_ Deceased

Please note: A photocopy of each parent/guardian's driver's license or other photo ID will be included with application when sent to the pastor.

**II**  
**INCARNATION**

**Developmental Descriptors Inventory**

Childs' Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current Age: \_\_\_\_\_  
Years Months

Preschool: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Person Completing Inventory: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Please review each descriptors. Mark with a (✓) if the descriptor is strength for the child. Mark with an (x) if further age-appropriate growth is needed in this area. Mark **NA** if this skill has not yet been introduced.

**Auditory Descriptors**

- \_\_\_\_\_ Listens without interrupting while maintaining eye contact in a small group.
- \_\_\_\_\_ Repeats short patterns of sounds, words or numbers.
- \_\_\_\_\_ Follows simple two or three step directions.
- \_\_\_\_\_ Recalls familiar rhymes, poems, and songs and completes a sentence with appropriate word or phrase.

**Fine Motor Descriptors**

- \_\_\_\_\_ Builds structures with blocks.
- \_\_\_\_\_ Holds crayon with thumb and finger not fist. Begins to hold primary pencil correctly.
- \_\_\_\_\_ Prints capital letters on unlined paper.
- \_\_\_\_\_ Strings beads and can follow pattern.
- \_\_\_\_\_ Holds scissors appropriately and cuts large objects.
- \_\_\_\_\_ Attempts to glue with some control.

**Gross Motor Descriptors**

- \_\_\_\_\_ Balances on one foot for a few seconds.
- \_\_\_\_\_ Walks forward, backwards, sideways on taped lines or footprints.
- \_\_\_\_\_ Correctly identifies right and left side.
- \_\_\_\_\_ Runs and gallops, begins to skip.
- \_\_\_\_\_ Walks up and down stairs with alternate feet.
- \_\_\_\_\_ Jumps with two feet without losing balance.
- \_\_\_\_\_ Bounces and catches large ball with two hands.
- \_\_\_\_\_ Imitates more complex movements.

(Continue)

**Language Descriptors**

- \_\_\_\_\_ Communicates thoughts and needs in complete sentences.
- \_\_\_\_\_ Recognizes colors.
- \_\_\_\_\_ Identifies upper case letters.
- \_\_\_\_\_ Identifies basic shapes.
- \_\_\_\_\_ Listens and retells stories in sequence.
- \_\_\_\_\_ Creates own story dictated to teacher or adult.
- \_\_\_\_\_ Understands opposites and spatial relationship such as under, above, between.

**Social-Emotional Descriptors**

- \_\_\_\_\_ Enjoys cooperative play. Shares and takes turns.
- \_\_\_\_\_ Follows routines and rules.
- \_\_\_\_\_ Strives to be independent.
- \_\_\_\_\_ Recognizes adult as authority and seeks adult support appropriately.
- \_\_\_\_\_ Shows age-appropriate self-control.
- \_\_\_\_\_ Uses words to influence peers.

**Visual Descriptors**

- \_\_\_\_\_ Matches color, shape, size.
- \_\_\_\_\_ Sorts and classifies objects by one or more attributes.
- \_\_\_\_\_ Completes simple puzzles.
- \_\_\_\_\_ Identifies likenesses and differences of objects.
- \_\_\_\_\_ Repeats patterns of 3 or 4 items.
- \_\_\_\_\_ Identifies a group of objects and can name objects removed from the group from memory.
- \_\_\_\_\_ Recognizes own printed name.
- \_\_\_\_\_ Identifies one to one correspondence with numerals 1-10.

Please provide any additional comment that would assist in describing the child such as special needs, talents, parental involvement, special services, recommendations, etc.

Teacher/Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for taking the time to complete this inventory and share your insights with us.

Kindergarten Team  
School of the Incarnation