

St. Dominic School

2005 Merton Avenue • Los Angeles, CA • 90041 (323) 255-5803 • www.stdominicla.us

Preschool Admissions Information for 2021-22 School Year

St. Dominic Preschool accepts potty-trained children between the age of 2 years, 9 months and 4 years.

VIRTUAL TOURS

 Virtual tours are available during the school week. Please call the school office, 323-255-5803, to make an appointment.

ASSESSMENT

Students enrolling in our preschool do not take an assessment. However, on the first one to two days of student attendance, parents should be available to stay with their children to ease the adjustment process.

DOCUMENTS NEEDED

□ Copy of Birth Certificate	☐ Consent for Emerg. Med Treatment, LIC 627
☐ Copy of Baptismal Certificate	□ Child's Health History, LIC 702
☐ Immunization Record & proof of TB	□ Notification of Parents' Rights, LIC 995
☐ Identification & Emergency Info, LIC 700	□ Personal Rights, LIC 613A
☐ Physician's Report, LIC 701	□ Nebulizer Care Consent, LIC 9166 (if applicable)
	☐ Parent Consent for Admin of Medication, LIC 9221

Completed applications with all the necessary documents must be returned to the school office as soon as possible. Priority applications are due February 25, 2021. No application will be processed until all the documents are presented. Applications will be evaluated after the assessment has been completed. Letters of acceptance will be mailed by mid-March.

PRESCHOOL SCHEDULES & FEES (Fees are paid monthly)

Once accepted, there is a registration fee of \$300 per child.

Full Day Options, 8:00 a.m. - 3:00 p.m.

Full week	M-F	\$519
3 days	M/W/F	\$337
2 days	T/Th	\$276

Half Day Options, 8:00 a.m. - 12:00 p.m.

Full week	M-F	\$450
3 days	M/W/F	\$300
2 days	T/Th	\$228

^{*}Please note, there is some flexibility when choosing days of attendance for the 2 & 3 days options.



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PRESCHOOL ADMISSION APPLICATION 2021-2022 School Year

FAMILY/PARENT'S LAST NAME			· · · · · · · · · · · · · · · · · · ·				
STUDENT INFORMATION							
STUDENT'S LAST NAME		FIRST NAME			MIDDLE NAME		
NICKNAME		BIRTHPLACE			DOB		AGE SEX (M/F)
HOME STREET ADDRESS		CITY	Ž	ZIP CODE	HOME PHONE NUMBER		
RELIGIOUS EDUCATION ATTENDANCE?	OCATION						
FAMILY INFORMATION							
FATHER'S LAST NAME	FIRST N	AME		R	ELIGION MARITAL STATUS		
OCCUPATION	WORK F	RK PHONE # CELL PHONE #			EMAIL ADDRESS		
MOTHER'S LAST NAME	FIRST NAME		R			MARITAL STATUS	
OCCUPATION	WORK PHONE # CELL PHONE #		CELL PHONE #	E	EMAIL ADDRESS		
IF DIVORCED, WHO HAS LEGAL CUSTODY OF THE APPLICANT?							
Student lives with: Both natural parents Mother only				Father only			
Mother/Stepfather Father/stepmother Guardian							
PREVIOUS SCHOOL(S) ATTEND	ED						
NAME OF SCHOOL				FROM		то)
NAME OF SCHOOL				FROM		то)
						_	

For Office Use:

Assessment Date: _____

Registration Fee: ___

Name and grades of other children applying and/or already enrolled in St. Dominic School:					
NAME	GRADE	NAME		GRADE	
STUDENT SACRAME	NTAL INFORMATION				
BAPTISM DATE	CHURCH		CITY	STATE	
	-		,	,	
Are you registered in S	t. Dominic Parish? ☐ YES ☐	∃ NO Date regist	ered Sunda	ay Envelope Number	
If no, are you registere	d in another parish? ☐ YES	☐ NO If yes, nam	e of parish:		
Have you been active i	n St. Dominic Parish	S □NO			
In what capacity?					
Why do you want your	child to attend St. Dominic Sc	hool?			
Please add any informa	ation which might be pertinent	in helping us eval	uate this application:		
How did you hear abou	at St. Dominic School?				