



# BISHOP MCDEVITT HIGH SCHOOL

## APPLICATION FOR ADMISSION

Thank you for your interest in Bishop McDevitt Catholic High School! We are pleased that you have chosen to apply to our school and we look forward to serving your family. We are glad you chose to become a Royal Lancer!

Required with submission of the completed application, please provide a copy of the students FINAL Seventh and CURRENT Eighth Grade year report card to

**Ms. Megan Gerhard**  
**Director of Admissions**  
**Bishop McDevitt High School**  
**125 Royal Avenue**  
**Wyncote, PA 19095**

## REGISTRATION & FEES FOR 2018-2019

**The Registration Fee is \$200.00 (\$250.00 after February 28, 2018).**  
**The School Fee is \$960.00 (payable over 11 months).**  
**The Mandatory Chance Drive is \$250.00.**

Listed below are some of the areas to which these fees apply:

- Administrative expenses for Academic Affairs, Student Services, and Ministry
- Classroom/curriculum related materials and supplies
- Office/Maintenance: contracts, equipment, supplies, and expenses
- Smart Tuition & Smart Aid
  1. Smart Tuition provides tuition management services for all Archdiocesan high schools. Services for parents include online account access, tuition and fees invoicing, payment processing, and 24 hour customer service.
  2. Parents seeking financial aid must complete a tuition assistance application by the deadline set in the previous school year, submitting the required forms to verify income, and the required fee. A link to the Smart Aid Tuition Assistance Application may be found on the school's website.
  3. Through the generosity of alumni, BLOCS, foundations, and other benefactors the Archdiocesan Office of Catholic Education and individual schools provide millions of dollars of financial support to parents through scholarships and tuition assistance.
  4. Additional information on scholarships and fees may be found on our website at [www.mcdevitths.org](http://www.mcdevitths.org) or by contacting the Business Office at 215-887-5575.

# INFORMATION

Please type or print all information, except signature, and complete all portions of this form. The registration fee must accompany this application. Acceptance of this fee does not imply admission; the entire fee is refundable **ONLY** if Bishop McDevitt does not accept the student for admission.

Applying to Grade:     9     10     11     12

Student Name \_\_\_\_\_  
(Last) (First) (Middle)

Gender     Male     Female    Student Social Security # \_\_\_\_\_

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

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

Student lives with (Mr. & Mrs., etc.) \_\_\_\_\_

Relationship to student     Parents     Other (Explain) \_\_\_\_\_

Telephone # (\_\_\_\_\_) \_\_\_\_\_     Home     Cell

Emergency Telephone # (\_\_\_\_\_) \_\_\_\_\_

Parent/Guardian E-mail Address \_\_\_\_\_

Student Religion:     Catholic     Non-Catholic

Parish/Church \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_    Born in USA?    Yes    No (if selected, complete the next line)

Country of Birth \_\_\_\_\_    Entered USA (month/year) \_\_\_\_ / \_\_\_\_

Public School District \_\_\_\_\_

Present and Previous School (s)	Location	Grades Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Does the applicant have an IEP or had any private psychological or educational evaluations?     Yes     No

Has your child ever been enrolled in Special Education classes?     Yes     No

Learning Disabled:     Yes     No (If Yes, when \_\_\_\_\_ at what school \_\_\_\_\_)

Is your student interested to join a Sport?     Yes     No (If so, which one(s))? \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Authorization to request academic information and health records

I hereby authorize Bishop McDevitt High School to request academic grades, other academic information, and health records regarding my son/daughter from schools previously attended and other agencies that provided him/her instructional services.

Parent/Guardian Signature \_\_\_\_\_

## PARENT / GUARDIAN INFORMATION

Father, Stepfather or Male Guardian \_\_\_\_\_  
(Last) (First) (Middle)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone # (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_  Full Time  Part Time

Father's High School \_\_\_\_\_ Year of Graduation \_\_\_\_\_

Mother, Stepmother or Female Guardian \_\_\_\_\_  
(Last) (First) (Middle)

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone # (\_\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_  Full Time  Part Time

Mother's High School \_\_\_\_\_ Year of Graduation \_\_\_\_\_

### MARITAL STATUS OF PARENTS

- Married  Separated  Divorced  
 Mother only living  Father only living  Both Parents deceased  
 Remarried (1 stepparent)  Single  Other(explain) \_\_\_\_\_

### SECOND PARENT INFORMATION

Please complete this section if Divorced, Separated or Remarried

Parent Name \_\_\_\_\_ Relationship to student \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

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

Telephone # (\_\_\_\_\_) \_\_\_\_\_ Parent E-mail Address \_\_\_\_\_

### LANGUAGE(S) SPOKEN AT HOME

- English  Chinese  French  German  
 Italian  Korean  Polish  Portuguese  
 Spanish  Tagalog  Ukrainian  Vietnamese  
Other \_\_\_\_\_ Does the student speak English fluently?  Yes  No

### ETHNIC BACKGROUND (for statistical purposes only)

- American Indian  Asian  African-American  
 Hispanic  Caucasian  Other

### Request for services from the Montgomery County Intermediate Unit

I give my son/daughter permission to enroll in remedial services (math and/or reading), counseling, and speech therapy provided by the county at no cost if needed.  Yes  No

### Authorization to Release Information

I authorize Bishop McDevitt High School to release all academic records, standardized test scores, and health records to academic institutions to which my son/daughter intends to enroll, e.g. other secondary schools, post-secondary schools, colleges and universities.  Yes  No

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please list any other students in your family who will attend Bishop McDevitt High School or any other Archdiocesan High School during the 2018-2019 school year.**

Name \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ School \_\_\_\_\_

Please list other students in your family who will attend Grade School during the 2018-2019 school year.

Name \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ School \_\_\_\_\_

**CERTIFICATE OF INDIVIDUAL REQUEST FOR LOAN OF TEXTBOOKS**

I hereby request the Secretary of Education of the Commonwealth of Pennsylvania, the loan of textbooks and instructional materials in accordance with Act 195 (1972), and Act 90 (1975) for my child attending Bishop McDevitt High School in Wyncote, Montgomery County, Pennsylvania

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

**COURSE SELECTION**

Students entering Bishop McDevitt for the 9th grade are rostered by the Assistant Principal in conjunction with the Department Chairpersons. Past performance, abilities as measured by standardized testing, and input from the sending school are criteria for student placement in courses and tracks. Final decision on rosters will be made at the discretion of the Assistant Principal. The school administration reserves the right to cancel a course.

What is the highest level of Mathematics that was completed in the students 8th Grade year?

Honors Math       Algebra I       Other \_\_\_\_\_

A four-year ART program exists. As a freshman, a student may take Art in place of a foreign language.

Do you prefer your child to take the first level of Art during his/her freshman year?  Yes  No

A four-year INSTRUMENTAL MUSIC program is offered. Students must have prior Music/Instrumental experience to be considered. Do you wish for your child to take music?  Yes  No

If yes, please list instrument \_\_\_\_\_ Number of years experience \_\_\_\_\_

Please list any extra-curricular or community service activities that you are currently involved in:

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

Date \_\_\_\_\_ Student Signature \_\_\_\_\_