



Catholic Tradition.  
*Academic Excellence.*

St. Mary of the Falls School  
8262 Columbia Road  
Olmsted Falls, Ohio 44138  
440-235-4580  
Fax: 440-235-6833

Dear Parents,

We are pleased that you have chosen St. Mary of the Falls School for your child's education. We are committed to providing a quality education based on Catholic values. We look forward to working with you and count on your support in continuing our strong Catholic traditions and academic excellence.

Tuition for the 2017-2018 school year for active St. Mary of the Falls parishioners is \$3,120 for the first child and \$2,995 for the 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> child. For a nonsubsidizing parish, the nonparishioner rate is \$4,600 per child. Tuition is payable in ten monthly payments beginning July 1. An active parishioner attends Sunday Mass on a weekly basis and supports the parish through weekly use of their church envelopes. Applications for financial assistance are made through Private School Aid Services (PSAS). Forms are found online at the school website.

Registration Procedure:

1. Complete the registration and all other necessary forms.
2. Pay the nonrefundable \$100.00 registration fee.
3. New families must sign up to attend an information night with Fr. Wally Hyclak and Mrs. Rajnicek.

Registration is not considered complete until all records have been received.

St. Mary of the Falls School has a dress code. Schoolbelles is our uniform provider. Catalogs are available online.

The school day is from 7:55am–2:30pm; St. Mary of the Falls offers a before and aftercare program for those families who need this service.

We look forward to meeting with you. If you have any questions, please contact the school office at 440-235-4580.

God Bless you,

Annemarie Rajnicek,  
Principal

**OFFICE OF CATHOLIC EDUCATION - DIOCESE OF CLEVELAND - PERMANENT RECORD CARD**  
**Saint Mary of the Falls School**  
**Olmsted Falls, OH 44138**



<b>STUDENT #</b>	<b>CLASS OF: (Year)</b>
<b>STUDENT INFORMATION</b>	
<b>Last Name</b>	<b>First Name</b>
<b>Middle Name</b>	<b>Sex</b>
<b>Birthdate</b>	<b>Birthplace (City, St, Country)</b>
<b>Date Entered</b>	

*Click the box to the left of the current residence.*

<input type="checkbox"/>	<b>Residence Address</b>	<b>City</b>	<b>County</b>	<b>Zip</b>	<b>Home Phone</b>	<b>Student Parish / City</b>
<input type="checkbox"/>						
<input type="checkbox"/>						

*Date student entered school.*

**Ethnicity (Optional)**  
 Amer Indian/Alaskan Native  
 Black/African Amer  
 Hispanic  
 Native Hawaiian/Other Pacific Islands  
 White  
 Multiracial

**SACRAMENTS**

<b>Baptism Date</b>	<b>Verified by</b>	<b>SCHOOL ENTERED FROM</b>
	Church	School from
<b>Reconciliation Date</b>	Rite	School from City
		School from State
<b>Confirmation Date</b>	City, St, Zip	Grade Entering
		<input type="radio"/> PK <input type="radio"/> K <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8

*Check the box(es) to the left of who student resides with.*

**STUDENT LIVES WITH**

<input type="checkbox"/>	<b>Natural Mother (NM)</b>	<b>Last Name</b>	<b>First Name</b>	<b>Maiden Name</b>	<b>Birthplace</b>	<b>Occupation</b>	<b>Employer</b>	<b>Work Phone</b>
<input type="checkbox"/>	<b>Natural Father (NF)</b>							
<input type="checkbox"/>	<b>Custodial M (CM)</b>							
<input type="checkbox"/>	<b>Custodial F (CF)</b>							
<input type="checkbox"/>	<b>Other</b>							

**PARENTS/CUSTODIAL PARENTS**

<b>Natural Mother (NM)</b>	<b>Religion</b>	<b>Parent Status</b>	<b>Education</b>
<b>Natural Father (NF)</b>			
<b>Custodial M (CM)</b>			
<b>Custodial F (CF)</b>			
<b>Other</b>			

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<b>Natural Mother (NM)</b>	<b>Religion</b>	<b>Parent Status</b>	<b>Education</b>
<b>Natural Father (NF)</b>			
<b>Custodial M (CM)</b>			
<b>Custodial F (CF)</b>			
<b>Other</b>			

**LEGAL GUARDIAN**

<b>Name</b>	<b>1.</b>	<b>4.</b>
<b>Address</b>	<b>2.</b>	<b>5.</b>
<b>City, St, Zip</b>	<b>3.</b>	<b>6.</b>

**LANGUAGE SPOKEN AT HOME**

English  Other (list)

*Other children in the family/list name & birthdates*



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## PERMISSION TO RELEASE SCHOOL RECORDS

By my (our) signature below, I (we) as parent(s) or legal guardian of

\_\_\_\_\_ whose date of birth is \_\_\_\_\_  
(Name of Student) (Date of Birth)

give permission to the principal of \_\_\_\_\_ School to  
(Name of School)

release the following school records of \_\_\_\_\_  
(Name of Student)

to St. Mary of the Falls School, 8262 Columbia Road, Olmsted Falls, OH 44138:

Place a check before the records authorized to be released:

- \_\_\_\_\_ Grades and academic records
- \_\_\_\_\_ Psychological assessments and records
- \_\_\_\_\_ Disciplinary records
- \_\_\_\_\_ Attendance records
- \_\_\_\_\_ Medical records
- \_\_\_\_\_ Testing results and/or evaluations

\_\_\_\_\_  
Witness Date

\_\_\_\_\_  
Parent Date

\_\_\_\_\_  
Witness Date

\_\_\_\_\_  
Legal Guardian Date

(ONLY FILL OUT IF YOU ARE DIVORCED)

**St. Mary of the Falls School**  
**Information Regarding Legal Custody**  
to be completed as part of the registration/reregistration agreement

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

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Address of child's residence: \_\_\_\_\_  
\_\_\_\_\_

Child lives with: \_\_\_\_\_ both parents  
\_\_\_\_\_ mother as custodial parent  
\_\_\_\_\_ father as custodial parent  
\_\_\_\_\_ grandparent(s) with legal custody  
\_\_\_\_\_ other (Please explain.) \_\_\_\_\_

Residential parent/guardian:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Is there a court order (or pending order) affecting the custody and/or residence of the child?

**Please attach a certified copy of the entire court order including the case number and those sections referring to visitation rights and contacts with the school. Also include the page bearing the Judge's signature and court seal. This copy should include any and all modifications made as of the date of registration of the child in the school. It is also the responsibility of the parents to inform the principal of any subsequent modifications during the child's tenure at the school.**

Non-residential parent:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Does the non-residential parent have visitation rights? \_\_\_\_\_

Is there a court decision that states that the non-residential parent should NOT receive school information or attend school activities? \_\_\_\_\_

Is the non-residential parents responsible for paying tuition? \_\_\_\_\_