



# MOTHER CAROLINE ACADEMY

515 Blue Hill Avenue, Dorchester, MA 02121 Phone: (617) 427-1177 Fax: (617) 427-7788

## APPLICATION FOR ADMISSION

### APPLICATION DEADLINE:

Early Decision: ALL APPLICATIONS MUST BE SUBMITTED BY **January 1**

**Early Decision Notification – February 15<sup>th</sup>**

**Applications submitted after January 1, will be considered on a rolling basis**

**Instructions:** Please print all information clearly. **All sections** of the application **must be completed** in order to be considered for admission.

### APPLICANT INFORMATION

Name: \_\_\_\_\_ **Grade Applying For:** \_\_\_\_\_  
                            First                            Middle                            Last

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

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

Home Phone: (    ) \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Language(s) Spoken at Home: \_\_\_\_\_

**Student Email:** \_\_\_\_\_ **Parent Email:** \_\_\_\_\_

### **Student's Ethnic Background (Optional – statistical purposes only)**

#### **Please check all that apply**

- \_\_\_\_\_ African American (Not Hispanic )  
\_\_\_\_\_ Caucasian  
\_\_\_\_\_ Asian or Pacific Islander (country of origin: \_\_\_\_\_)  
\_\_\_\_\_ Latina (country of origin: \_\_\_\_\_)  
\_\_\_\_\_ Caribbean Islander (country of origin: \_\_\_\_\_)  
\_\_\_\_\_ African (country of origin \_\_\_\_\_)  
\_\_\_\_\_ Other (Please specify) \_\_\_\_\_

#### **How did you hear about Mother Caroline Academy? (Please check one)**

- \_\_\_\_\_ Current Student/Parent/Friend \_\_\_\_\_ Flyer, (if so where \_\_\_\_\_) \_\_\_\_\_ Family Member  
\_\_\_\_\_ Radio \_\_\_\_\_ Newspaper Ad (which newspaper?) \_\_\_\_\_  
\_\_\_\_\_ Other

### FAMILY INFORMATION

**Applicant Name:** \_\_\_\_\_

**Parent/Guardian I**

**Parent/Guardian II**

Name: \_\_\_\_\_  
            First                                  Last

Name: \_\_\_\_\_  
            First                                  Last

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

\_\_\_\_\_

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

\_\_\_\_\_

Employer: \_\_\_\_\_

\_\_\_\_\_

Occupation: \_\_\_\_\_

\_\_\_\_\_

Work Phone: \_\_\_\_\_

\_\_\_\_\_

Cell Phone: \_\_\_\_\_

\_\_\_\_\_

Place of Birth: \_\_\_\_\_

\_\_\_\_\_

**Email:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Check (if appropriate):**

- Parents Together
- Father Remarried
- Father Deceased
- Single Parent

- Parents Divorced or Separated
- Mother Remarried
- Mother Deceased

Applicant resides with: \_\_\_\_\_

Relationship : \_\_\_\_\_

**SIBLINGS**

NAME

AGE

GRADE	SCHOOL	AT HOME	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>

**RELIGION:** \_\_\_\_\_ (OPTIONAL)

**PARISH OR CHURCH:** \_\_\_\_\_

**FAMILY FINANCIAL INFORMATION**

**Financial Information:** To be considered for acceptance to Mother Caroline Academy, **both parents must submit copies of their most recent income tax forms (1040)** and complete the additional information on the page below.

**Current Year  
Mother  
(or Guardian)**

**Current Year  
Father  
(or Guardian)**

- |                                    |          |          |
|------------------------------------|----------|----------|
| 1. Total Yearly Gross Salary/Wages | \$ _____ | \$ _____ |
| 2. Unemployment Compensation       | \$ _____ | \$ _____ |
| 3. Child Support/Alimony           | \$ _____ | \$ _____ |
| 4. Veteran's Benefits              | \$ _____ | \$ _____ |
| 5. Social Security                 | \$ _____ | \$ _____ |
| 6. Disability Benefits             | \$ _____ | \$ _____ |

**Annual Family Income:** \$ \_\_\_\_\_ (If custodial parent/guardian has remarried, you must also include step-parent's financial information.)

**Information on residence**

1. Do you own your home? \_\_\_\_\_
2. Do you rent your home? \_\_\_\_\_
3. What amount of rent or mortgage do you pay each month?      \$ \_\_\_\_\_
4. Do you receive housing assistance (for example, Section 8)? \_\_\_\_\_
5. Do you or your daughter have MASS Health for insurance? \_\_\_\_\_
  - What is your monthly contribution for MASS Health? \$ \_\_\_\_\_
6. Is your family receiving any type of transitional assistance? \_\_\_\_\_
7. How is income received? Social Sec. \_\_\_ TANF \_\_\_ Disability \_\_\_ Child Supp. \_\_\_ Unemployment \_\_\_

**Please list all members of household (include relatives)**

Name	Relationship to Applicant	Age

Provide estimated information below for all dependent children/family living in home in 2017-2018

Name	Grade	School	Tuition	Amount You Pay
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	\$ _____	\$ _____

9. Please list any special circumstances or financial situations (such as medical or tuition costs, special circumstances involving employment, etc.) the Admission Committee should be made aware of.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Certification:** I \_\_\_\_\_, hereby certify, under penalties of perjury, that the information contained in this Financial Information Form is true, correct and complete to the best of my knowledge and belief. I understand that if the information contained herein subsequently proves not to be true, correct and complete, it may cause my child's admission to be revoked and myself prosecuted or sued for fraud.

Parent/Guardian Signature: \_\_\_\_\_ Phone: \_\_\_\_\_ Date \_\_\_\_\_

**ACADEMIC INFORMATION (Please Print Clearly)**

**Applicant Name:** \_\_\_\_\_

Name of Current School: \_\_\_\_\_

School Type: Public\_\_ Private\_\_ Parochial\_\_ Charter\_\_ Other (specify): \_\_\_\_\_

Address of Present school: \_\_\_\_\_

Phone Number of Present School: \_\_\_\_\_

Name Of Principal or Head of Present School: \_\_\_\_\_

**Schools Previously Attended**

School	Grades	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please list any relatives (not previously named) who have attended **Mother Caroline Academy**

**Name of Relative**                                      **When did relative attend**                                      **Relationship to Applicant**


**PARENT QUESTIONNAIRE**

**Applicant Name:** \_\_\_\_\_

**Note to Parents/Guardians:** The purpose of this questionnaire is to help the Admissions Committee decide if Mother Caroline Academy can appropriately meet the needs of each applicant. All information furnished by parents/guardians is confidential.

1. What are your thoughts about parent engagement in your child’s education?

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2. How do you plan to support your daughter if she is accepted to Mother Caroline Academy?

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3. Does your child have an **IEP** (Individualized Education Plan?) Yes                      No

4. If yes, when was the IEP issued?

5. Has your child received any special academic support either inside or outside her current school program during the past 3 years? If yes, please describe. You may include additional documentation.

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6. Has your child been tested by a learning specialist, child study team or other trained evaluator during the past 3 years? Yes                      No

**If yes, please furnish a copy of the testing report.**

7. Is there any illness or disability, which may interfere with your child’s participation in extracurricular activities?  Yes  No

If yes, please indicate what they are (asthma, allergies, diabetes, etc.) and explain.

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**PARENT ESSAY**

Please describe a moment where you saw your daughter shine and what you feel was one of her proudest accomplishments.

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**PARENT'S STATEMENT OF INTENT**

**Applicant Name:** \_\_\_\_\_

Mother Caroline Academy requires that parents/guardians or family members contribute **20 hours of service** during the course of the academic year. These 20 hours of service are known as **Parent Partnership Points**. We provide various opportunities for parents to earn those hours/points by participating in parent workshops, classroom activities, fundraising, helping with breakfast etc... What type of service would you be interested in?

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

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

**This application is an expression of intent only and is not binding upon the parents/guardians or Mother Caroline Academy. Mother Caroline Academy complies with all state and federal anti-discrimination laws in our admissions process.**

**I/We submit this application (including the section on family information) with an understanding and acceptance of all the rules, conditions and requirements of the school.**

**I/We understand that this application is only an expression of interest and is not binding.**

**It is my understanding that Mother Caroline Academy is an academically challenging school with a rigorous code of conduct and that full participation of parents or guardians (including attending classes, attendance at faculty/parent meetings, evening study, field trips, and other parent and family activities) are necessary in to order to meet the requirements of the program.**

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

**POLICY OF NON-DISCRIMINATION**

Mother Caroline Academy admits students of any race, color, nationality, religion and ethnic origin to all rights, privileges, programs and activities generally accorded or made available at the school. Mother Caroline does not discriminate on the basis of race, color, nationality, religion or ethnic origin in the administration of its educational policies, scholarships, athletics and other school administered programs.

Deadline for all application materials to be received by our Admission Office is:

**APPLICATION DEADLINE:**

**Early Decision: ALL APPLICATIONS MUST BE SUBMITTED BY January 1**

**Early Decision Notification – on or before February 15<sup>th</sup>**

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**Application materials should be mailed or returned to:**

**Mother Caroline Academy  
Admission Committee  
515 Blue Hill Avenue  
Dorchester, MA 02121**

**STUDENT QUESTIONNAIRE**

**Applicant Name:** \_\_\_\_\_

**Responses must be written by the student in her own handwriting. The questionnaire must be returned with the application.**

Name of Student: \_\_\_\_\_  
                                    First    Middle    Last

Name you prefer to be called: \_\_\_\_\_

Your present school: \_\_\_\_\_ How many years have you attended this school? \_\_\_\_\_

- 1. What do you like best about school? Why?

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- 2. List the four best books you read during the past year. Which ones were assigned by your school and which ones did you read on your own?

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- 3. Please list any activities that you regularly participate in outside of school (music, sports etc...)-  
**PLEASE USE FULL SENTENCES**

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**TRANSCRIPT RELEASE FORM**

**Applicant Name:** \_\_\_\_\_

**(Please submit Transcript Release Form to your daughter's school)**

**To student's current school:**

\_\_\_\_\_ has applied for admission to Mother Caroline Academy.  
**(Student's Name)**

Please remit the following information to the Academy Admissions Office as soon as possible:

- ❖ Grades to date, including the previous 2 years
- ❖ Standardized test scores
- ❖ Any special educational or psychological testing
- ❖ Attendance records and discipline reports

**To the parent/guardian of the applicant:**

Applicant's Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

I hereby authorize my child's school transcript and records be released to Mother Caroline Academy's Office of Admission. Please send requested materials to:

**Mother Caroline Academy  
Admission Committee  
515 Blue Hill Avenue  
Dorchester, MA 02121**

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Forms must be completed and returned to the school with the application for admission.**