

# VISITATION CATHOLIC SCHOOL

*A Catholic Tradition of Excellence in Education – Since 1947*

*Junior Kindergarten through 8th Grade*

*2021-2022 Application*

**Please complete one application PER CHILD you wish to enroll in the school.  
Please complete both sides of the application.**

JK students must be 4 by August 31st  
Kindergarten students must be 5 by August 31st

All new students are admitted on a probationary status for one year.  
Their progress is monitored and reviewed at each trimester for continued attendance.

Check Grade Student Will Be Entering									
JK	K	1	2	3	4	5	6	7	8
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Please Print Clearly

### A. Student Information

Student Name \_\_\_\_\_ M  F  Date of Birth \_\_\_\_\_  
Name of Current School \_\_\_\_\_ Current Grade \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_

### B. Family Information

**Parent / Guardian** \_\_\_\_\_ Religion \_\_\_\_\_  
First Middle Last  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Occupation \_\_\_\_\_  
Home No. \_\_\_\_\_ Cell No. \_\_\_\_\_  
\_\_\_\_\_ email address

### Family Information

**Parent / Guardian** \_\_\_\_\_ Religion \_\_\_\_\_  
First Middle Last  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Occupation \_\_\_\_\_  
Home No. \_\_\_\_\_ Cell No. \_\_\_\_\_  
\_\_\_\_\_ email address

(over)

*Principal Mr. Christopher Watson*

8740 South Emerson Avenue, Los Angeles, CA 90045 - Phone: 310-645-6620 - [www.visitationschool.org](http://www.visitationschool.org)

*Educating The Whole Child In A Christ Centered Environment*

**C. Parish Information**

Name \_\_\_\_\_

Registered

Yes  No

**D. Referred by:**

**E. Special Notes/Attachments**

- 1. Transfer students: A copy of the students' **CUM Record** (Archdiocesan School) or **Academic Transcript** (Public School). Yes  N/A
- 2. A copy of the students' **most recent report card and standardized test scores.** Yes  N/A
- 3. Has your child ever been retained or repeated a grade? Yes  No
- 4. Copy of immunization record is attached? Yes  No
- 5. **Please attach a family picture to your application.**

\_\_\_\_\_

*Parent Signature*

*Date*

**Additional Information:**

Please provide any more information below regarding academic, social, emotional, or physical aspects of your child, and how we can best meet your child's needs?

---



---



---



---



---



---



---



---



---



---



---



---



---



---



---



---