



St. Thomas the Apostle Catholic School

7303 SW 64th Street
Miami, FL 33143
305.661.8591
www.stamiami.org

Welcome

Thank you for considering St. Thomas the Apostle Catholic School for your child's education. We are honored that you have chosen to visit us. Our mission at St. Thomas the Apostle Catholic School is to foster a community of life-long learners, led by the Faith of the Roman Catholic Church, through a transdisciplinary-approach to learning, initiated by inquiry in which the students will think globally and display acts of compassion through service.

St. Thomas the Apostle Catholic School is proud to share our beautiful learning environment with you. Today you will be given a guided tour of the school while classes are in session. This will provide you with the opportunity to have a glimpse of the wide spectrum of learning programs that are available.

Our curriculum is set forth by the Archdiocese of Miami Department of Schools and is implemented in a challenging and motivational manner in the attainment of level goals. The school is fully accredited by the State of Florida and the Florida Catholic Conference.

Attached for your convenience is the Schedule of Tuition and Fees for a New Parishioner and Schedule of Tuition and Fees for Active Parishioners. Please feel free to contact us for further information at the School Office 305-661-8591. For additional information, we invite you to visit our website at www.stamiami.org. Thank you once again for your interest in St. Thomas the Apostle Catholic School and May God Bless you.

In Christ,

Mrs. Lisa M. Figueredo '89

Principal

St. Thomas the Apostle... Pray for Us!

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Dear Parents,

The fundamental goal of religious education at St. Thomas the Apostle is to instill in your child the personal love God has for him or her. We arrive at this goal through study, prayer, sacraments, and service. A sacrament is a sacred sign and cause of grace instituted by Christ in the Church to continue the saving action of God through the Holy Spirit. The sacraments will be a part of your child's spiritual formation.

In the event your child has not completed his or her sacraments of initiation (Baptism, First Holy Communion, Confirmation) we will assist you with religious formation so that we can facilitate the inception of the sacraments. This will be done through their daily religion classes and, if necessary, additional classes. Generally, First Holy Communion is received in the 2nd Grade and Confirmation is received in the 7th Grade.

Thank you for considering St. Thomas the Apostle Catholic School for the spiritual formation of your child. I look forward to working with you as we nurture in our students a sincere faith and love for Jesus and his teachings.

In Christ,

A handwritten signature in blue ink that reads 'Mrs. Tania Gonzalez'.

Mrs. Tania Gonzalez
Director of Religious Education

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Commitment Letter School Year 2020 -2021

I am fully aware of the following commitments as a parent of a student(s) of St. Thomas the Apostle Catholic School:

1. My family will attend weekly Sunday Mass.
2. We will contribute twenty hours of volunteer service for school events, two of which are at the festival.
3. We understand that all families are required to use the FACTS payment system for Tuition, Development Fund, and Incidentals. I will follow the payment guidelines and all regulations provided by FACTS, for example, regards to late payments and NSF.
4. We are aware that all financial responsibilities must be current before any report cards, Portals and/or other school records are released.
5. We are aware that all students new to St. Thomas the Apostle School in any grade level will be considered probationary for the first ninety school days.
6. Families that have been Active Parishioners at St. Thomas the Apostle Catholic Church for at least 24 months prior to enrollment at St. Thomas the Apostle Catholic School will pay the Active Family Tuition rates and fees. An "Active Parishioner" is a family that is registered at St. Thomas the Apostle and meets the established Mass attendance requirements for the previous 24 month period.
7. Families that are New Parishioners for the 24 month period prior to enrollment will pay the New Parishioner Tuition rates and fees for the first academic year.

Family Name _____ Parish Family Number _____

Student/s Names _____

Entering Grade/s for the school term of 2020 – 2021 _____

Parent's Signature _____ Date _____

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New Families

Pre-Application: \$150.00 per child.

Contract Fees due upon acceptance.

New Family Registration Fee	950.00	Per Family
Raffle Ticket	215.00	Per Family
Materials / Book/Insurance/Supplies for PK3 to 8 th Grade	990.00	Per Child
Materials / Book/Insurance/Supplies for PK2	325.00	

Rates for PK3 to 8th

	1 st Child	2 nd Child	3 rd Child	4 th Child	5 th Child
Family Discount on Tuition	0%	15%	25%	25%	30%
Tuition	9,289.00	7,895.65	7,431.20	6,966.75	6,502.30
Student Fees	1,600.00	1,600.00	1,600.00	1,600.00	1,600.00
Family Fees	1,800.00				
Lunch Included					
	Per 1 Child	Per 2 Children	Per 3 Children	Per 4 Children	Per 5 Children
Total:	\$12,689.00	\$22,184.65	\$31,215.85	\$39,782.60	\$47,884.90

Rate for PK2

Tuition	9,289.00
Student Fees	1,000.00
Family Fees	1,800.00
Lunch Included	
Total:	\$12,089.00

Kinder Graduation Fee: \$125.00

8th Grade Graduation Fee: \$300.00

Fees are nonrefundable

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Returning Families

Registration Fee / Letter of Intent: \$625.00 per family, due on **November 21st, 2019**.

Contract Fees due **February 27, 2020**.

Raffle Ticket	\$215.00	Per Family
Materials / Book / Insurance / Supplies for PK3 to 8 th Grade	\$990.00	Per Child
Materials / Book / Insurance / Supplies for PK2	\$325.00	

Rates for PK3 to 8th

	1 st Child	2 nd Child	3 rd Child	4 th Child	5 th Child
Family Discount on Tuition	0%	15%	25%	25%	30%
Tuition	7,945.00	6,753.25	6,356.00	5,958.75	5,561.50
Student Fees	1,600.00	1,600.00	1,600.00	1,600.00	1,600.00
Family Fees	1,800.00				
Lunch Included					
	Per 1 Child	Per 2 Children	Per 3 Children	Per 4 Children	Per 5 Children
Total:	\$11,345.00	\$19,698.25	\$27,654.25	\$35,213.00	\$42,374.50

Rate for PK2

Tuition	7,945.00
Student Fees	1,000.00
Family Fees	1,800.00
Lunch Included	
Total:	\$10,745.00

Kinder Graduation Fee: \$125.00

8th Grade Graduation Fee: \$300.00

Fees are nonrefundable

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Attach 4x6 Family Picture Here

Application Due Date – 11/15/19

(Screening /Testing fee of \$150.00 payable to: St. Thomas the Apostle Catholic School is due with the Application)

Date _____

Entering Grade _____

PLEASE PRINT OR TYPE

Student Information

Student Last Name	First	Middle	Month/Day/Year of Birth	Place of Birth
_____	_____	_____	_____	_____
Student Street Address	City	Zip Code	Student Home Phone	Student Religion
_____	_____	_____	_____	_____

Family Information

Father's /Guardian's Last Name	First	Middle	Mother's / Guardian's Last Name	First	Middle
_____	_____	_____	_____	_____	_____
Father's /Guardian's Street Address	City	Zip Code	Mother's / Guardian's Street Address	City	Zip Code
_____	_____	_____	_____	_____	_____
Father's /Guardian's Place of Birth	Religion		Mother's / Guardian's Place of Birth	Religion	
_____	_____		_____	_____	
Father's / Guardian's Occupation	Work Phone		Mother's / Guardian's Occupation	Work Phone	
_____	_____		_____	_____	
Father's / Guardian's E-mail	Cell Phone		Mother's / Guardian's E-mail	Cell Phone	
_____	_____		_____	_____	

Parish Information

Registered in this Parish? Yes No **Saint Thomas the Apostle Church Envelope Number** _____

If no, Parish Registered In _____

Student Sacramental Information

Baptism	<input type="checkbox"/> Yes <input type="checkbox"/> No	Church	_____
		Name	_____
		City	_____
First Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No	Church	_____
		Name	_____
		City	_____
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Church	_____
		Name	_____
		City	_____

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Transfer School Information

Name of last school attended		Grade	
Street Address	City	State	Zip Code
Name of person responsible for tuition and fees			

The Archdiocese of Miami is authorized under Federal law, to enroll non-immigrant alien students and issue I-20 Certificates, in order for students to obtain F-1 status. If you need assistance, please inform the office at the time of registration.

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Family Code _____ **(for office use only)**

Student Information: School Year: _____ Date _____ Entering Grade: _____

Name: _____ **Religion:** _____
Last First Middle

Date of Birth: Mo. Day Yr. _____ **Place of Birth:** _____ **Age:** _____
Sex: _____

Is the student a citizen of the United States? **Yes / No**
If the answer is No, please give Immigration status of the student: _____

Is this student Hispanic/Latino? **Yes / No**

What is the student's race?
American Indian/Alaska Native _____ Native Hawaiian or Other Pacific Islander _____
Asia _____ White _____
Black or African American _____

Student Lives With: ___ Both Parents ___ Mother ___ Father ___ Guardian ___ Mother/Stepfather ___ Father/Stepmother

If custodial rights of children are subject to any legally imposed requirements/schedules, the applicable court order and/or any other documentation setting forth these requirements must be attached to and submitted with this form along with completed HIPAA/FERPA form. This includes any determination of parental and/or custodial rights related to any child as a result of any proceedings whatsoever.

Name of Person(s) with whom student lives: _____

Home Address: _____

Home Telephone: _____ Email Address: _____

Has the student received the following sacraments?

Baptism: **Yes / No** Name of Church _____ Date _____

First Communion: **Yes / No** Name of Church _____ Date _____

Confirmation: **Yes / No** Name of Church _____ Date _____

What parish does the student's family attend? _____

Name of Last School Attended _____ Language Spoken at Home _____

Has this child undergone a Neurological, Psychological (Neuropsychological and/or Psycho Educational) evaluation, IQ, Speech and Language evaluation, and/or Occupational therapy evaluation. **Yes / No**

If yes, please specify _____

MATERNAL INFORMATION

Mother's Full Name _____ Maiden Name _____

Home Address _____

Home E-mail _____

Home Phone _____ Cell Phone _____

City _____ State _____ Zip _____ Occupation (please specify if self-employed) _____

Name of Employer _____ Title _____

Work Phone _____ Work E-mail _____

Employer's Address _____

City _____ State _____ Zip _____

Country of Origin _____

High School Attended _____

College Attended _____

Mother's Religion _____

Has the student's mother received the following sacraments?

Baptism **Yes / No** First Communion **Yes / No** Confirmation **Yes / No**

Marital Status of Mother (please check one)

Married Separated Divorced Widowed

If married, year and place of marriage _____

If married, in the Catholic Church? **Yes / No** Name of Church _____

Please fill in if applicable:

Name of Stepfather _____

Occupation (please specify if self-employed) _____

Name of Employer _____ Title _____

Work Phone _____ Cell Phone _____

Employer's Address _____

City _____ State _____ Zip _____

PATERNAL INFORMATION

Father's Full Name _____

Home Address _____

Home E-mail _____

City _____ State _____ Zip _____ Home Phone _____
Cell Phone _____

Occupation (please specify if self-employed) _____

Name of Employer _____ Title _____

Work Phone _____ Work E-mail _____

Employer's Address _____

City _____ State _____ Zip _____

Country of Origin _____

High School Attended _____

College Attended _____

Father's Religion _____

Has the student's father received the following sacraments?

Baptism **Yes / No** First Communion **Yes / No** Confirmation **Yes / No**

Marital Status of Father (please check one)

Married Separated Divorced Widowed

If married, year and place of marriage

If married, in the Catholic Church? **Yes / No** Name of Church _____

Please fill in if applicable:

Name of Stepmother _____

Occupation (please specify if self-employed) _____

Name of Employer _____ Title _____

Work Phone _____ Cell Phone _____

Employer's Address _____

City _____ State _____ Zip _____

Siblings:

Name	Age	School Attending
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If the student has or has had relatives in our school, please list:

Name of Relative	Relationship	Years Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

To whom shall school correspondence be sent?

_____ Father and Mother _____ Father only _____ Mother only

To whom should bills be sent?

_____ Father and Mother _____ Father only _____ Mother only

I / We hereby acknowledge that the information provided in this form is true and accurate furthermore I / We acknowledge that I / We have read, understand and agree to abide by the policies and procedures set forth in the Saint Thomas the Apostle Catholic School handbook as may be amended from time to time.

Parent Signature and Date

Parent Signature and Date

The Archdiocese of Miami is authorized under federal law to enroll nonimmigrant alien students and issue I-20 certificates in order for students to obtain F-1 status. If you need assistance please let the school know at registration.



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Pastoral Questionnaire (to be completed only if you are not a current parish family)

Parent(s) / Guardian(s) please complete this section

Family Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Name of Church _____

Address _____ City _____ State _____ Zip _____

Names of children and grades for which applying:

1. (Name) _____ (Grade) _____ 2. (Name) _____ (Grade) _____

3. (Name) _____ (Grade) _____ 4. (Name) _____ (Grade) _____

5. (Name) _____ (Grade) _____ 6. (Name) _____ (Grade) _____

Pastor/Church Leader complete this section

The above family has applied to our Catholic School. It is our desire to develop a supportive relationship between home, school, and church. Please assist us by answering the brief questionnaire below. In this way we will gain more insight into the family and you in turn might be able to use any updated material which appears above on our form. Kindly return this form directly to the school within 7 days to aid in the application process. You are free to make a copy of the questionnaire and share its contents with the family if you so desire.

1. Do you personally know the family? For how long?

2. How long has the family been in attendance at your church?

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3. Beyond attendance, how involved is this family in your church's other ministries/programs?

4. Describe their worship service attendance.

5. Describe Sunday school attendance, if applicable.

6. Are members of the family active in the work of the church? Yes ___ No ___ If "yes" please explain.

7. Based on your personal knowledge of this family, would you recommend that we accept this family into our school? Yes ___ No ___ Why?

8. Please feel free to add further comments or suggestions on how we may improve this step of our application process:

Pastor's Signature _____ Date _____

Please mail to: St. Thomas the Apostle Catholic School
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Academic Year 2020/2021

Dear Parents,

We are very excited about the upcoming year. Please note that our sixth, seventh, and eighth graders participate in a Tablet Program. Once your child has been accepted you will receive additional correspondence in regards to the tablet program – such as Open Box Day, the mandatory meeting in which your child will receive their tablet, costs (lease – year 1 \$700, year 2 \$400, year 3 \$400), and additional training. New 8th graders will be able to rent the tablet as year 1 for \$700.

We look forward to seeing you in the next academic year.

In Christ,

A handwritten signature in black ink that reads "L. Figueredo".

Mrs. Lisa M. Figueredo
Principal

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