

APPLICATION FORM

2021-2022

☐ Sibling of Current Student and/or Parishioner ☐ New to GSS

THE GOOD SHEPHERD SCHOOL

1401 Carrollton Avenue * Towson, Maryland 21204 * 410-825-7139 * GOODSHEPHERDRUXTON.ORG

CHILD'S NAME: _____ Preferred Name: _____

Gender M/F: _____ Birth Date: ____/____/____

Applications are recorded in the order they are received. Decision letters are mailed by February 1st after current families are placed. To accept placement, a registration contract and NON-REFUNDABLE deposit are required to reserve a spot for your child.

APPLICATION FOR: (More than one may be checked off if interested.)

*Priority is given to but not limited to children with specified DOB.

<input type="checkbox"/> Little Lambs (12-18 months by Sept. 1)*	<input type="checkbox"/> 2-Day 2s (2 by Sept. 1)	<input type="checkbox"/> Pre-K (4 by Sept. 1)
<input type="checkbox"/> Busy Bears (18-23 months by Sept. 1)*	<input type="checkbox"/> 3-Day 2s (2 by Sept. 1)	<input type="checkbox"/> Extended Pre-K (4 by Sept. 1)
<input type="checkbox"/> BB/J2s (2 between Sept. 1 & Dec. 31)	<input type="checkbox"/> 3-Day 3s (3 by Sept. 1)	<input type="checkbox"/> Kindergarten (5 by Sept. 1)
	<input type="checkbox"/> 5-Day 3s (3 by Sept. 1)	

PARENT/GUARDIAN (1) NAME: _____

HOME ADDRESS: _____

 (City) (State) (Zip code) Phone h: _____ c: _____

EMAIL ADDRESS: _____

PARENT/GUARDIAN (2) NAME: _____

HOME ADDRESS (if different from above): _____

 (City) (State) (Zip code) Phone h: _____ c: _____

EMAIL ADDRESS: _____

CURRENT MEMBER OF THE CHURCH OF THE GOOD SHEPHERD: YES ☐ / Year Joined: _____ NO ☐

Prior preschool or program attended: _____

ARE YOU A PAST PARENT? YES ☐ NO ☐ How did you hear about us? _____

Has the applicant consulted with a physician or other professional regarding physical, emotional or academic development? _____

If yes, please provide additional information: _____

Applications are accepted from children of any faith, race, color, or national origin. Priority is given to children whose families are affiliated with the school or have been participating members of The Church of the Good Shepherd for one year. The date the application is received is also considered.

Tuition is paid through FACTS Management System and may be paid in full, by semester or monthly.

The following tuitions are for the **2021-2022** school year:

Little Lambs: \$1,462	2-Day 2s: \$2,980	Pre-K: \$6,059
Busy Bears: \$1,462	3-Day 2s: \$3,996	Extended Pre-K: \$8,450
BB/J2s: \$2,348	3-Day 3s: \$4,180	Kindergarten: \$8,990
	5-Day 3s: \$5,990	

I hereby apply to the Good Shepherd School for the **2021-2022** school year. I have enclosed an application fee of **\$30** that is **non-refundable** and not applicable to tuition. (For **Sibling Applications**, the \$30 application fee will be processed through the current FACTS account.) Decision letters are emailed by **February 1st**. In the event there is room for my child in the appropriate class and I choose to accept this spot, I will complete a registration contract and submit it with a deposit. The **non-refundable deposit**, applicable to tuition, is **\$300** for all classes.

Signature of Parent/Guardian _____

Date _____

For Office Use Only: Date: _____

Check/Cash received: \$ _____ Ck. # _____

FACTS: _____