



# ST. CATHERINE'S ACADEMY

215 N. Harbor Blvd. • Anaheim, CA 92805 • 714-772-1363 • Fax 714-772-3004

E-mail: [admissions@stcatherinesacademy.org](mailto:admissions@stcatherinesacademy.org)

## Parent Questionnaire

**To be completed and returned with the application (please print)**

Name of Parent				
Applicant Name			Age	Date of Birth
Current Grade	Grade applying for	Program Interest (Please circle one) <b>Fall / Summer</b>	Status (Please circle one) <b>Day Student / 5-Day Resident / 7 Day Resident</b>	
How did you hear about St. Catherine's? (if you were referred to us by a current cadet or alumni, please give their name)				

### SCHOOL INFORMATION

Student is presently attending (please circle one) <b>Private School / Public School</b>		Length of attendance	Teacher's Name
Name of School	Address		Telephone
Reason for transfer			
Previous schools attended and reason for transfer			
Has your son ever repeated a grade? <b>Yes / No</b>	If so, which grade?	Reason	
Has your son ever been suspended or expelled from school? <b>Yes / No</b>	If so, when?	Reason	

## **STUDENT INFORMATION**

Please state the reason why you wish your son to attend St. Catherine's Academy?			
Does your son wish to attend St. Catherine's Academy?		Does your son seem well liked by his peers?	
What are your son's personal strengths?		What are your son's personal challenges?	
What are your son's academic strengths?		What are your son's academic challenges?	
Is your son self-directed with his homework?		Please explain	
Do you help him with his homework?	Do you track his performance with his teachers?	What are his duties at home?	What type of reward system, if any, do you use?
Do you have any specific concerns with your son?			
Does your son have any behavioral problems? <b>Yes / No</b>	Please explain		
Has your son ever been to counseling? <b>Yes / No</b>	Duration of time	Reason for counseling	
Does your son participate in any league sport or extra-curricular activities?	Does your son participate in Boy Scouts?		
Please explain any health problems your son has			
Is your son currently taking any medication?		Which medication and reason for taking:	
<b>Has your son had any specialized testing or does he have an IEP?</b> Please explain and provide a copy of the results.			
<b>Is your son in need of any educational resources? YES/NO</b>	<b>Please explain:</b>		

Please feel free to make any comments about your son that you would like to share.