



**3900 S University Drive
Davie, Florida 33004
954.472-7086**

www.saintdavidschool.org

Application for Admissions (Page 1)

Application Deadline: 02/20/2026

Today's Date: _____

Student Information

Student's Name: _____ Entering Grade: _____ Gender: Male Female

Date of Birth: _____ Mailing Address: _____

Parent's E-Mail Address: _____

Student resides with: Both parents Mother Father Grandparents Other: _____

Is the applicant a sibling of a current Saint David student or alumni? Yes No

Name of Student/Alumni: _____ Grade/Class of: _____

Sacramental Information

Baptism: Yes No Church: _____ Date: _____

First Communion: Yes No Church: _____ Date: _____

Confirmation: Yes No Church: _____ Date: _____

Where does your family attend Mass on Sundays? _____

Describe your family's involvement at Saint David's Parish (CCD, Ministries, etc.)

Does the student attend CCD/Religion classes? Yes No Where? _____

If not Catholic, what faith does your family practice? _____

Name of school currently attended by student: _____

(Address, city, state, zip, and phone #)

Parent Contact Information

Father's Name:	Mother's Name:
Father's Address:	Mother's Address:
Father Occupation:	Mother Occupation:
Father's Cell #:	Mother's Cell #:
Father's Work Phone:	Mother's Work Phone:
Father's E-Mail:	Mother's E-Mail:
Marital Status:	Marital Status:

Sibling Information

An application must be submitted for each child applying to Saint David. We cannot guarantee that spaces will be available for all siblings to start in the same school year.

Name: _____ Age: _____ Grade: _____ School: _____

Name: _____ Age: _____ Grade: _____ School: _____

List all languages spoken at home and understood by the student: _____

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Application for Admissions (Page 2)

Is your child enrolled in an Exceptional Student Education (ESE) program (e.g., speech, SLD, gifted, etc.) or does your child have special needs? If yes, briefly explain and please include current IEP or copies of evaluations.

Why do you want your child to attend Saint David Catholic School? _____

Please describe your child as objectively as you can. What are the child's strengths and weaknesses at home and as a student at school? What special abilities does your child have (i.e., athletic, artistic, musical, academic)?

Does the student have any illness, disease, or physical disability which affects the general health of the student, school performance, or participation in the athletic program of the school? Please include health conditions, such as diabetes or allergies, so we can be sensitive to the student's needs.

Saint David is neither a public nor a private school. We are a Catholic School for the community of Saint David. Registration for our school is through a screening and interview process and completion of all required paperwork. During the application process the following criteria is used to evaluate new and continuing students:

The length of registered membership in Saint David Parish.

The regular practice of the Catholic faith by the entire family.

The degree of activity of the family in the various parish ministries.

The regular support of Saint David Church in proportion to the means of the family (determined through church envelopes and involvement in pledge programs).

The participation of siblings in our Religious Education program.

The factor of having siblings currently enrolled at Saint David Catholic School.

The transfer of students from other Catholic schools or of qualified students from parishes which do not have their own parish school. Student meeting or exceeding current grade level skills.

I have read and understand the criteria for admission to Saint David Catholic School:

Parent Signature: _____ **Date:** _____

Print Name: _____

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Request for Records & Principal Recommendation (Page 1)

This form is to be completed and sent by the student's previous school and returned directly to Saint David.

Request for Student Information

Name of Student: _____ Current Grade: _____

I give permission to _____
(School name and address)

for the release of school information concerning my child to Saint David Catholic School.

Parent Signature

Schools, please provide all final report cards, standardized test scores, or any IEP/504 Plans (if applicable). Thank you.

(to be completed by previous school)

To the Principal, Counselor, or Teacher:

The above-named student has applied for admission to Saint David Catholic School. Please complete this form, attach a copy of the student's most recent standardized test results, and mail to the attention of Michelle Chimienti, Principal. Parents may not "hand deliver" this form to Saint David Catholic School. This form and records may also be scanned and e-mailed to admissions@saintdavid.org. Please include the name of the student in the subject line.

The information provided on this form will only be used in the admission process and will not become a part of the student's permanent record. This data will be used to compare the above-named student with other qualified candidates.

Thank you for your assistance.

We would appreciate your realistic observations in the areas listed below.

Leadership

- Positive Influence
- Usually a follower
- Negative influence

Cooperation

- Usually cooperative
- Sometimes cooperative
- Uncooperative

Dependability

- Dependable
- Sometimes dependable
- Does not meet obligations

Emotional Stability

- Well balanced and mature
- Maturity consistent with age
- Maturity below grade level

Relation of Achievement to Ability

- Overachiever
- Average achiever
- Underachiever

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Request for Records & Principal Recommendation (Page 2)

This form is to be completed and sent by the student's previous school and returned directly to Saint David.

Request for Student Information

Grade Level Equivalent: Reading: _____ Math: _____

General Citizenship: Outstanding Adequate Needs Improvement

Has the student been involved in any acts of academic dishonesty? Yes No

Has the student ever been suspended? Yes No

Has the student been expelled from school? Yes No

Comments: _____

Do the parents of the student meet their financial obligations to the school? Always Most of the Time Rarely N/A
(does not apply to public schools)

Do the parents of the student volunteer? Always Most of the Time Rarely

Do the parents cooperate with teachers in the areas of homework and academics? Always Most of the Time Rarely

Do any of the following apply to the student?

IEP/504 Plan Academic Interventions Speech/Language Therapy Gifted Student

Please add any additional comments you feel would be helpful in our evaluation of the applicant:

Schools, please provide all final report cards, standardized test scores, or any IEP/504 Plans (if applicable). Thank you.

Signature

Title

Date

Print Name

Phone Number

Name of School: _____

(Address, City, State, and Zip)

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Applicant's Checklist

Thank you for considering Saint David Catholic School for your child's education.

Please submit the Application for Admissions and all documents to the main office at:

Saint David Catholic School
3900 South University Drive
Davie, FL 33328
(954-472-7086)

Please use the following checklist to make sure your application is complete.

- ___ \$50 Application Fee (non-refundable)
- ___ Two letters of recommendation from a pastor, current Saint David families, or previous educators
- ___ 2024-2025 Final Report Card and current Report Card
- ___ Standardized test scores, grades 2-8
- ___ Individualized Education Plans (if applicable)
- ___ Request for Records & Principal Recommendation Form completed & sent by the previous school directly to Saint David.
- ___ Attach a Family photo (4x6) to the upper left corner of this application.

APPLICATIONS WILL NOT BE ACCEPTED WITHOUT ALL REQUIRED INFORMATION ATTACHED. PLEASE DROP OFF IN PERSON AT THE MAIN OFFICE BY FRIDAY, JANUARY 23, 2026, 4PM.

Documents can also be scanned and e-mailed to admissions@saintdavid.org. Please include the student name and incoming grade in the subject line.

Saint David Catholic School does not discriminate against students with disabilities. The school provides minor adjustments necessary to accommodate students with disabilities. A delay in disclosing a student's disability and/or an accommodation request may delay or impede the school's ability to make certain accommodations. Parents/guardians are therefore required to disclose student disabilities and request accommodations prior to registration in school. Such disclosures should be made to the school's Administration and Guidance Counselor.

The Archdiocese of Miami is authorized under Federal Law to enroll Non-Immigrant Alien Students and issue I-20 certificates to obtain "F-1" status. If you need assistance, please let the school know at registration.

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