Childhood is a journey, not a race.

Dear Families,

WELCOME TO DEVELOPMENTAL KINDERGARTEN! I am excited for your interest in DK. I am happy to be your child's teacher this upcoming year. Together, we will make your child's school year exciting, challenging, and most of all…FUN!!! My goal is to create a safe, comfortable, stimulating learning environment so that all children can succeed and grow to their potential.

I love that DK provides the gift of time to our youngest learners.

We are so fortunate to have a full-time aide in the classroom, Mrs. Hoffman. Having two adults provides a lower student to teacher ratio and ensures that we do most of our learning in small groups.

I can guarantee that every child will learn many new things at school this year socially and academically. So much of what our young children learn simply happens from being in school and participating in all of our activities. Therefore, not everything your child learns will come home to you on paper. We will be reading new stories every day. Research has shown that reading to your child and *talking* about those stories are key factors in your child's reading development. Please read stories, nursery rhymes, poems, or any other literature that your child is interested in every day for at least 15 minutes!

We are partners in your child's education. Feel free to contact me at any time (email: ginamaria@comcast.net or golson@petoskeysfx.org) with comments or concerns. Specific day-to-day information about Developmental Kindergarten will come home with your student on the first day of school. I can't wait to meet everyone! We will have a great year!

Sincerely,

Gina Olson ☺

St. Francis Xavier Developmental Kindergarten Program

Welcome to St. Francis Xavier Developmental Kindergarten Program. Enclosed you will find a welcome letter from Mrs. Olson, student supply list, registration form, financial support agreement, emergency contact form and required immunization schedule. To enroll your child for the 2024-2025 academic school year, the following documents are required:

_____ Registration Form

_____ Financial Support Agreement with $100.00 enrollment fee due by May 1st, 2024

I understand the enrollment fee is non-refundable and will not be credited towards tuition.

_____ Emergency Contact Form

_____ Birth Certificate-A copy of your child's birth certificate can be obtained from the county of his/her birth

_____ Immunization Record-The child who has an immunization record that is not up-to-date according to guidelines established by the Michigan Department of Health may not enter the classroom. If you need a waiver contact the health department.

_____ Proof of Residency-A copy of the parent's driver's license, property tax bill or utility bill can be accepted

We would be happy to assist you with any further questions you may have. Please contact the St. Francis Xavier School Office at (231) 348-2360 and ask for Melissa or Sierra.

Developmental Kindergarten (DK) Our Development Kindergarten program is designed for children that turn 5 years old in August through the end of November. DK is a half day program geared to develop kindergarten readiness skills. The class meets 5 days a week from 8:00 a.m. to 11:00 a.m. Students that complete DK in the spring, transition into full day kindergarten in the fall.

St. Francis Xavier School Developmental Kindergarten

Tuition Policy and Rate Statement

Financial Support Agreement

2025-2026 Academic Year

Father's Name:_____ Mother's Name:_____

Student's First and Last Name:_____

Daytime Telephone# _____Daytime Telephone#_____

Billing Address:_____City_____Zip_____

Total Tuition for the 2025-2026 school year: $3,000.00

1. Please initial which payment options you will be committing to for the 2025-2026 school year:

Full Payment at time of enrollment of $3,000.00_____ ← Initial here

or

10 equal payments of $300 each, starting September 15 2025 _____ ← Initial here

1. Every family will be responsible to sell 3 Gala Auction Raffle tickets for the annual school fundraiser. _____ ← Initial here

St. Francis uses an online tuition payment program, called FACTS. Please see the attached

letter to set up your account.

I have read, understand and agree to the current tuition rate and payment schedule that I have selected.

I understand and agree to my responsibilities and obligations as set forth in these policies.

I have included my $100.00 registration fee payable to St. Francis Xavier School.

Parent/Guardian Signature:_____Date:_____

ST. FRANCIS XAVIER SCHOOL

STUDENT EMERGENCY CONTACT FORM

(one per student)

Child's Legal Name: _____ Birthdate:_____

Home Address:_____City:_____Zip:_____

Home Phone:_____ Email:_____

Father's Name:_____Cell phone:_____

Father's employer:_____Work phone:_____

Mother's Name:_____Cell phone:_____

Mother's employer:_____Work phone:_____

Sibling Information:

Name:_____ Grade:_____

Name:_____ Grade:_____

Name:_____ Grade:_____

Emergency Action Contact Plan:

Name & phone numbers in order of contact

1.Name_____Phone_____

2.Name_____Phone_____

3.Name_____Phone_____

4.Name_____Phone_____

In case of a school closing due to inclement weather or unexpected building emergency, send this child:

____SFX CDC ____Parent will pick up

SPECIAL MEDICAL CONSIDERATIONS:

Family Physician:_____Phone_____

(Include allergies, etc.)

Parent Signature:_____Date:_____

Registration Form

St. Francis Xavier School
414 Michigan St., Petoskey, MI 49770

Student I.D. # _____
Date of Registration_____

Student Information

Last Name_____ First Name_____ MI_____
Name preferred_____ Gender: Male/Female Grade_____
SSN_____ Birth date_____ Birthplace(city)_____
Home Phone (____)_____ Unlisted? Yes/No
Home Address_____
City/State/Zip_____
County of Residence_____

Siblings

Name_____ Birthdate_____ S.F.X. student? Yes/No Grade_____
Name_____ Birthdate_____ S.F.X. student? Yes/No Grade_____
Name_____ Birthdate_____ S.F.X. student? Yes/No Grade_____

Ethnic category: (Please circle one)

Caucasian Hispanic African American Native American Asian Multi-Racial Native Hawaiian Pacific Islander

Do we have your permission to have your family name, address, phone number and child/children's names listed in the school directory? Yes/No

Family Information

Father/Guardian

Dr./Mr. Please circle one: Married Single Widowed Divorced
Name_____ Home Phone_____
Address_____
City/State/Zip_____
Employer_____ Position_____
Work phone_____ Cell Phone_____
E-mail _____
Responsible for bill? Yes/No

Mother/Guardian

Dr./Mrs./Miss/Ms. Please circle one: Married Single Widowed Divorced
Name_____ Home Phone_____
Address_____
City/State/Zip_____
Employer_____ Position_____
Work phone_____ Cell Phone_____
E-mail_____
Responsible for bill? Yes/No

Family Information (continued)

**Legal Guardian/Joint Custody (if divorced)

Name_____ Home Phone_____

Address_____

City/State/Zip_____

Employer_____ Position_____

Work phone_____ Cell phone_____

E-mail_____

Responsible for Bill? Yes/No Does student reside with you? Yes/No Relationship_____

Parish Information

Religion_____

Parish or Church_____

Dates: Baptism_____ First Eucharist_____ Confirmation_____

Health Information

Doctor_____ Phone_____

Dentist_____ Phone_____

List any medical conditions/allergies the school should be aware of:_____

First DTP Immunization (required for enrollment) _____

School History

Last school attended_____ Date left_____

Address_____ School Phone_____

Principal_____ Has the student repeated a grade? Yes/No If yes, which grade?_____

Has your child ever received any special education services or speech language classes? Yes/No

If yes, what type of services?_____

Counselor/Teacher:_____ Phone_____

Referral Program

How did you hear of our school?_____

If one of our parents referred you, please state his/her name?_____

Other Required Forms

I have also attached these additional forms:

___Emergency Contact Form ___ Information Checklist

___Financial Support Agreement ___Registration Form

Signature:_____

***Return with Registration**

Information Checklist

In order to maintain the accuracy of our school records and to plan for the next school year, please complete this form and return.

Student Directory

Print parent's first and last name:_____

If divorced, please list additional name(s), address and phone to be included in Directory_____

_____

Please check the information you would like included in the student directory.

_____ address
_____ phone number
_____ cell number

_____ please do not include our family in the SFX School Directory.

Email addresses will not be included in the Student Directory, however, we need to confirm email addresses each year for all families so we can provide important email updates throughout the year. Even if you have given us your emails in the past, please include it here for verification. Make sure to identify whether an Ao@ is a zero or a letter; if an Al@is a number or a lower case letter, and print letters and numbers clearly. Thank you.

Email 1:_____
Email 2:_____

Photo Permission

I understand that during the course of school and school sponsored events, students will occasionally be photographed and/or videotaped for various S.F.X. & Catholic Communities of L'Arbre Croche (CCLC parish media), the Diocese of Gaylord, advertising, website, newspaper articles, Auction advertisements, etc. I hereby authorize such activities to take place.

List all children's names who attend St. Francis Xavier School_____
_____

Parent Signature_____ Date_____

St. Francis Xavier uses an online tuition payment program called FACTS.

You can select from the following Payment methods and options that St. Francis Xavier is offering:

- Payment Methods
    - Checking Account ACH
    - Savings Account ACH
    - Credit Card (Visa, Discover, Mastercard, AmEx)
- Payment Options
    - Monthly Payments - September-June
    - Quarterly Payments-September/November/February/May
    - Semi-Annual Payments-September/February
    - Payment in Full-September

Simply type this website address in the address bar of your Internet browser.

Website Address: https://online.factsmgt.com/signin/3GBMF

If you were registered with facts the previous school year select: **sign in to manage your facts account**.

If you are a new member to the facts system select: **create a facts account** and the system will walk you through the registration process.

If you have any questions feel free to contact FACTS at 866-441-4637.

Sincerely,

Adam Dobrowolski, Principal