



Blessed Sacrament Huguenot Catholic School

2501 Academy Road, Powhatan, VA 23139

(804)598-4211 • (804)598-1053 – Fax

BSHKnights.org

Mission:

BSH is a college-preparatory Catholic school that provides Preschool—12th grade students with a strong general education grounded in faith, love, and service to others. We embrace students of all faiths, abilities, and interests.

We seek to grow individuals in their academic knowledge, spirituality, character, civic engagement, ethics, and decision-making to encourage them to live up to their full potential.

Kindergarten Application for Admission

Did your child attend a Pre-K program? Yes / No Name of School: _____
Application for Grade: _____ School Year: _____
Other schools to which applications have been made: _____

Student Information

Student's Name: _____
(First) (Middle) (Last) (Preferred Name)
Home Address: _____
(Street) (City) (State) (Zip)
Gender: Male / Female Date of Birth: _____ Current Age: _____
Birth Certificate #: _____ (Copy must be presented to school personnel for verification)
Ethnicity: _____ Hispanic or Latino OR _____ Non Hispanic or Latino (choose one)
Race: _____ American Indian or Alaska Native _____ Asian _____ Black or African American
_____ Native Hawaiian or other Pacific Islander _____ Two or more races _____ White
Religious Affiliation: _____ Parish/Church: _____

Parent Information

Father's Name: _____
(First) (Middle) (Last) (Preferred Name)
Address (if different from student): _____
(Street) (City) (State) (Zip)
Occupation: _____ Employer: _____
College Attended: _____ E-mail: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Mother's Name: _____
(First) (Middle) (Last) (Preferred Name)
Address (if different from student): _____
(Street) (City) (State) (Zip)
Occupation: _____ Employer: _____
College Attended: _____ E-mail: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____

Family Information

The Applicant Lives With:

Mother _____ Father _____ Stepmother _____ Stepfather _____ Other _____
Mother Deceased _____ Father Deceased _____ Parents are Separated _____ Parents are Divorced _____

Number of Siblings: _____ Name: _____ Age: _____ School _____
Name: _____ Age: _____ School _____

Please list any relatives who attended Huguenot Academy, Blessed Sacrament High School, and/or Blessed Sacrament Huguenot Catholic School:

Name _____ Years Attended _____
Name _____ Years Attended _____

Questionnaire

Please help us to know your son or daughter by telling us about them.

What do you hope the benefits of a Blessed Sacrament Huguenot education would be?

What activities does your child enjoy doing at home?

Confidential Information

Does the applicant have a diagnosed learning disability?	Yes _____	No _____
Has the applicant ever received special education services of any kind?	Yes _____	No _____
Has the applicant ever received professional counseling?	Yes _____	No _____
Has the applicant ever been dismissed from a daycare program or preschool?	Yes _____	No _____
Does your child have any allergies?	Yes _____	No _____
If so, are they on any medication?	Yes _____	No _____
Does your child have tubes in their ears?	Yes _____	No _____
Does your child have frequent ear infections?	Yes _____	No _____

Please attach a note of explanation to any questions that you checked "Yes."

If your child has been tested by a specialist for any of the following, please list the dates:

Vision _____ Speech _____ Hearing _____ Occupational Therapy _____

Please comment on any surgeries, serious illnesses, or accidents that your child may have had. _____

Services and Programs

Please indicate the following services and programs you wish to receive more information on:

- ☐ Bus Transportation
- ☐ Learning Support and In-Class Accommodations
- ☐ Mighty Knights Before and After School Care
- ☐ Need-Based Financial Aid
- ☐ Student Organizations

Acknowledgement

By signing below, I confirm that the information provided on this application is true and complete to the best of my knowledge. I understand that Blessed Sacrament Huguenot Catholic School has the right to deny admittance to or force the withdrawal of any student whose acceptance is based on false or incomplete information.

Parent/Guardian Signature

Date

Payment Information

Application fees are non-refundable and must be paid upon submission of this form.
Payment methods include: Cash, Check (Made payable to BSH), or Credit Card (Amex, Discover, MasterCard, Visa)

Credit Card Number

Expiration Date

CCID # (3 Digit ID Code)

House Number

Billing Zip Code

Parent/Guardian Signature

Phone Number

Date

Official Use Only			
_____	_____	_____	_____
Cash/Check#/CC#	Amount	Date Received	Received By

Blessed Sacrament Huguenot Catholic School admits qualified students without regard to race, color, religion, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to the students at the school.