

Metro Detroit Catholic High School Freshman Application

**Freshman applications to the schools listed below
are accepted beginning October 1.**

To simplify the application process for students applying to a Catholic high school in the Archdiocese of Detroit, the following Catholic high schools will accept this Metro Detroit Catholic High School Freshman Application. For specific questions regarding an individual school's admissions policy, please contact the admissions office at the school(s) where your child is applying.

Co-Educational Schools

Bishop Foley Catholic High School
Cabrini High School
Cardinal Mooney Catholic High School
Divine Child High School
Gabriel Richard Catholic High School/Riverview
Our Lady of the Lakes Catholic High School
Shrine Catholic High School

All Girls Schools

Academy of the Sacred Heart
Ladywood High School
Marian High School
Mercy High School
Regina High School
St. Catherine of Siena Academy

All Boys Schools

Brother Rice High School
De La Salle Collegiate High School
Detroit Catholic Central High School
Loyola High School
St. Mary's Preparatory
University of Detroit Jesuit High School

Co-Educational Campus/Single Gender Classes

Everest Collegiate High School

Metro Detroit Catholic High School Freshman Application

Directions for Completion and Submission of the Application

1. Applications are accepted beginning October 1 of each school year.
 2. Acceptance notifications are mailed beginning on the fourth Friday of January of each school year.
 3. Only current 8th grade students are permitted to submit this application during their 8th grade year.
 4. All portions of the application must be copied and mailed to the admissions office of EACH school that your child is planning to apply to. High schools are neither responsible nor permitted to share this application with other schools. For a list of school mailing addresses that accept this Freshman Application, please see the next page of this application packet.
 5. If at any time you have questions regarding this application, please contact one of the listed schools your child is applying to. Contact information is enclosed.
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Application Sections I – III TO BE COMPLETED BY PARENTS/STUDENTS

Section I – Applicant Information: to be completed by the parent or guardian

Section II – Student Application: to be completed by the student

Section III – Supplement: to be completed by the student

Please mail Sections I – III together.

Application Sections IV – V TO BE COMPLETED BY CURRENT SCHOOL

Section IV – Transcript Release: to be completed by the school counselor or registrar

Section V – School and Student Form: to be completed by the school principal, vice principal or counselor

Please have the school mail sections IV – V together to each school your child is applying to.

Application Section VI TO BE COMPLETED BY CURRENT TEACHER

Section VI – Teacher Recommendation: to be completed by a current teacher in the field of Math, Science, Language Arts, Social Studies or Foreign Language

Please supply the teacher with this specific form. Teachers may make copies of the completed form. Mailing directions are located on Section IV. The teacher may mail the completed form directly to the student's school(s) of choice, or the completed form may be sent with Sections IV and V from the school office.

Requirements for Admission to Catholic High Schools Using the Freshman Application

1. **Completion and Submission of all six sections (I – VI) of this application**
2. **Completion of the High School Placement Test (registration website: detroit.stsusers.com)**
3. **Completion of a Shadow Day******
4. **Admissions Interview******

****** Please note some schools require an interview and/or shadow day for acceptance. Please check with each school your child is applying to for specific requirements.**

Please visit each school's website for information on scheduling a shadow day, information regarding the High School Placement Test (dates, registration, etc.), and scheduling an admissions interview if necessary.

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Participating Schools Contact Information

Co-Educational Schools (Co-educational classes unless otherwise noted)

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All Girls Schools

<input type="checkbox"/> Academy of the Sacred Heart Admissions Office 1250 Kensington Rd. Bloomfield Hills, MI 48304 http://www.ashmi.org Admissions: Kris Sanders 248-646-8900 x129 / Fax: 248-646-4143 ksanders@ashmi.org	<input type="checkbox"/> Ladywood High School Admissions Office 14680 Newburgh Rd. Livonia, MI 48154 http://www.ladywood.org/ Admissions: Emily Nemeth 734-591-1544 x263 / Fax: 734-591-4214 enemeth@ladywood.org	<input type="checkbox"/> Marian High School Admissions Office 7225 Lahser Rd. Bloomfield Hills, MI 48301 http://www.marian-hs.org Admissions: Tina Pedersen 248-644-1946 / Fax: 248-502-3034 tpedersen@marian-hs.org
<input type="checkbox"/> Mercy High School Admissions Office 29300 W. 11 Mile Rd. Farmington Hills, MI 48336 http://mhsmi.org/ Admissions: Jen Stark and Maureen Weiss 248-476-2484 / Fax: 248-476-4278 jstark@mhsmi.org and mpweiss@mhsmi.org	<input type="checkbox"/> Regina High School Admissions Office 13900 Masonic Blvd. Warren, MI 48088 http://reginahs.com/ Admissions: Karen Hlywa 586-585-0500 x222 / Fax: 586-585-0507 khlywa@reginahs.com	<input type="checkbox"/> St. Catherine of Siena Academy Admissions Office 28200 Napier Rd. Wixom, MI 48393 http://www.saintcatherineacademy.org/ Admissions: Adora Ibrahim 248-946-4848 / Fax: 248-438-1679 admissions@saintcatherineacademy.org

All Boys Schools

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<input type="checkbox"/> Loyola High School Admissions Office 15325 Pinehurst St. Detroit, MI 48238 http://loyolahsdetroit.org/ Admissions: Michael Black 313-861-2407 x110 / Fax: 313-861-4718 mblack@loyolahsdetroit.org	<input type="checkbox"/> St. Mary's Preparatory Admissions Office 3535 Commerce Rd. Orchard Lake, MI 48324 http://www.stmarysprep.com Admissions: Candace Castiglione 248-683-0514 / Fax: 248-683-1756 admissions@stmarysprep.com	<input type="checkbox"/> University of Detroit Jesuit High School Admissions Office 8400 S. Cambridge Ave. Detroit, MI 48221 https://www.uofdjesuit.org/ Admissions: Patrick Donnelly 313-862-5400 / Fax: 313-862-3299 patrick.donnelly@uofdjesuit.org

**Metro Detroit Catholic High School
Freshman Application**

**Section I – Applicant Information
(to be completed by parent or guardian)**

APPLICANT

Last Name First Name Middle Name

Preferred Name

Address

City State ZIP

Parent Preferred Phone check: home cell

Religious Affiliation(s)

Parish/Place of Worship

Age

Date of Birth (mm/dd/yy)

City/State of Birth

Grade

School District of Residence

Current School

Please list any other school(s) attended in the last three years

RESIDENCE Student resides with (check all that apply):

Parent 1/Guardian Name: _____

Parent 2/Guardian Name: _____

Who has legal custody of the applicant? Check all that apply:

Parent 1/Guardian Name: _____

Parent 2/Guardian Name: _____

If parents are not married, please provide a copy of the custody order.

Correspondence should be mailed to:

Student address listed above only All addresses listed on next page

Section I – Applicant Information, cont'd. (to be completed by parent or guardian)

PARENT 1

Relationship to Applicant _____ Title _____ Living Deceased

Last Name _____ First Name _____

Preferred Name _____ Preferred Email _____

Address _____

City _____ State _____ ZIP _____

Primary Phone _____ check: home cell _____ Secondary Phone _____ check: cell work _____

Occupation _____ Employer _____

High School Attended _____ (optional) _____ College(s) Attended _____ (optional) _____

STEPPARENT INFORMATION (if applicable):

Title _____ Last Name _____ Preferred First Name _____

PARENT 2

Relationship to Applicant _____ Title _____ Living Deceased

Last Name _____ First Name _____

Preferred Name _____ Preferred Email _____

Address _____

City _____ State _____ ZIP _____

Primary Phone _____ check: home cell _____ Secondary Phone _____ check: cell work _____

Occupation _____ Employer _____

High School Attended _____ (optional) _____ College(s) Attended _____ (optional) _____

STEPPARENT INFORMATION (if applicable):

Title _____ Last Name _____ Preferred First Name _____

Section I – Applicant Information, cont'd. (to be completed by parent or guardian)

SIBLINGS Please complete a line below for each of the applicant's siblings:

Name Current School Current Grade

Name Current School Current Grade

Name Current School Current Grade

Name Current School Current Grade

ALUMNI/ALUMNAE Please complete a line below for family members who attend/have attended one of the Catholic high schools you are applying to:

Name Relationship to Applicant Class of School

Name Relationship to Applicant Class of School

Name Relationship to Applicant Class of School

Name Relationship to Applicant Class of School

HISTORY Please describe any circumstances which have affected or may affect the applicant's academic performance, school attendance and/or participation in school activities (examples: frequent moves/changes of school, accommodation plan, separation/loss of a significant family member, disciplinary action, etc.):

Please describe any extenuating circumstances pertaining to the sequence of your child's schooling (examples: double promotion, repeating a grade, being asked to withdraw from a school, being suspended or placed on probation, etc.):

Metro Detroit Catholic High School
Freshman Application
Section II – Student Application
(to be completed by student)

APPLICANT _____

Last Name

First Name

Middle Name

Please describe your academic interests and detail any academic achievements for which you have been honored during grades 6 – 8 (examples: list academic subjects you enjoy and at which you excel, awards and honors such as Student of the Month, National Junior Honor Society, Honor Roll, etc.):

Please describe any academic difficulties you have encountered during grades 6–8 (examples: an academic subject that you find particularly challenging, a learning environment that you found difficult, etc.):

Please describe your co-curricular interests and detail achievements during grades 6-8 (examples: list clubs, community service activities, hobbies, athletics and leadership opportunities that you participate in, both inside and outside of school, as well as any awards or special achievements you have accomplished in these activities):

Section II – Student Application, cont’d. (to be completed by student)

Is there anything else you would like us to know about you?

STATEMENT OF CONFIDENTIALITY:

It is the policy of the participating Catholic high schools that all information received regarding a candidate's application for admission will be treated with complete confidentiality. Only authorized school personnel have access to this information and then only to the extent that the information is relevant to admission and placement decisions.

STATEMENT OF NON-DISCRIMINATION:

It is the policy of the participating Catholic schools not to discriminate on the basis of race, color, religion, disability, national or ethnic origin in the administration of their admission policies, educational policies, tuition assistance or any school administered programs. Co-educational and co-institutional schools accepting this application do not discriminate on the basis of gender. Participating schools reserve the right to limit admission or give preference to Catholic applicants.

SIGNATURES OF APPLICANT AND PARENT(S)/GUARDIAN(S):

I/We hereby state that the information contained herein is true and complete. I/We have not knowingly omitted any pertinent information regarding student's academic, family, medical or behavioral history. I/We acknowledge that supplemental information may be required by school(s) and understand that our application(s) will not be reviewed until supplement(s), if required, have been submitted.

Signature of applicant:

Signature Date

Signature of all parent(s)/guardian(s):

Signature Date

Signature Date

**Metro Detroit Catholic High School
Freshman Application
Section III – Supplement**

The supplement section for the Freshman Application will be specific for each school. Your child will need to complete a supplement for EACH high school he/she is applying to.

To obtain the supplement, please visit the admissions page of each school's website. Instructions for completing the supplement will be located there. If you have additional questions regarding this, please contact the school admissions office(s) where your child is applying.

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Metro Detroit Catholic High School
Freshman Application
Section V – School and Student Profile Form

This form is to be completed by the applicant's current school principal, assistant principal, or school counselor.

Applicant's full name: _____
Last First Middle

Applicant's current school: _____ Current grade: _____

SCHOOL PROFILE

Your school serves grades _____ to _____

Number of students in entire school: _____

How large is a typical class? _____ students

In what month does your school year begin? _____ End? _____

Please explain your school's grading system:

A - F 0 - 100 4.0 4.3 (honors/advanced courses weighted)

Four passing grades Three passing grades

Other (please explain):

What is the passing mark? _____ Honors mark? _____

STUDENT PROFILE

Does your school rank its students? Yes No

This candidate ranks _____ out of _____ students.

Are students placed in classes/sections according to ability? Yes No

If yes, please tell us in which level the applicant is placed:

Does your school have a program for exceptional students? Yes No

Is this student involved in the program? Yes No Name of Program: _____

Extent of student involvement: _____

How long has the student been involved in this program? _____

If the student is currently on an accommodation plan, please forward along with student records.

Section V – School and Student Profile Form, cont'd.

If the student's attendance record is not listed on the transcript or report card, please indicate the number of days below:

Days absent this year _____ Days absent last year _____
Days tardy this year _____ Days tardy last year _____

If the student is not, or has not been in good academic standing within the last year, please explain.

Has the student ever been dismissed, suspended, placed on probation, or received other serious disciplinary action?

Yes No

If yes, please describe the incident and action taken:

Name of person completing this form:

Name Title

Signature Date

() Telephone Email address

Thank you for taking the time to complete this form.

Metro Detroit Catholic High School
Freshman Application
Section VI – Teacher Recommendation Form

Parent(s)/Guardian(s): Please submit this form to one of your child's current 8th grade teachers in one of the following subjects: Math, Language Arts, Science, Social Studies or Foreign Language.

In consideration of the teacher's willingness to complete this Teacher Recommendation Form, we agree on behalf of ourselves and our child to: waive not waive our/his/her right to access this form from any source at any time.

Parent 1 Name/Signature/Date: _____

Parent 2 Name/Signature/Date: _____

Applicant Name/Signature/Date: _____

Teachers: Please make copies of this form and send one to each high school where this student is applying. You may also give the completed form to the school office for mailing with Sections IV and V of this student's application.

Applicant's full name: _____
Last First Middle

Applicant's current school: _____ Current grade: _____

The student named above is applying for admission to one or more Catholic high schools in the Archdiocese of Detroit. As part of the admissions process, we appreciate your cooperation in completing this form. This evaluation and its contents will remain confidential, and will only be used by school personnel in connection with an admissions decision. If the named student is denied admission, the Catholic high school will keep the confidentiality of this document secure and will not share details listed within.

If you would prefer to discuss the applicant by phone rather than completing this form, please check the box below, sign and return this form with your telephone number(s). An Admissions representative will contact you soon.

I would like to discuss the applicant personally rather than completing this form.

Best time to contact: _____ Contact #: _____

Name of person completing this form: _____

Name of course(s) you teach to this student: _____

How long have you known this student? _____

How large is the particular section(s) of the course(s) this particular student is in? _____

Briefly describe your course: _____

The items that follow ask for your sense of this student's relationship within the school community, emotional and social growth, and intellectual development. Your insight will help us to know this child. We understand the difficulty in evaluating a student, and we are aware that children are constantly developing and changing.

What are the first three words that come to mind when evaluating this student?

1. _____ 2. _____ 3. _____

What are this student's special interests or abilities? _____

Section VI – Teacher Recommendation Form, cont’d.

We would appreciate your comments and observations on the strengths, weaknesses, learning style, behavior, or classroom accommodations needed of this student. Feel free to submit any additional material if necessary.

Please comment on the parent(s)/guardian(s) support of the child’s learning and the adult cooperation with the school.

Please comment on the student’s character, citizenship, and contributions to your school community.

Please rate this applicant using the scale below.

	Excellent (Top 10% this year)	Above Average	Average	Below Average	No Basis for Judgment
Motivation to learn					
Intellectual curiosity					
Ability to work in a group					
Organizational skills					
Work habits					
Academic preparation					
Respect for peers/staff					
Conduct					
Maturity					
Integrity/Honesty					
Effort/Determination					
Overall academic promise					

Thank you for taking the time to complete this form.