

SAINT CATHERINE OF GENOA SCHOOL

192 SUMMER STREET
SOMERVILLE, MA 02143

Student Record Check List

Student Name: _____

Grade: _____

- _____ Registration Form
- _____ Tuition Payment Plan
- _____ Registration Fee
- _____ After School Program Yes No
 Full-Time Part-Time As Needed
- _____ Release of Record
- _____ Home Language Survey
- _____ Emergency Form
- _____ Lunch Form Yes No
- _____ Birth Certificate
- _____ Baptism Certificate (if Catholic)
- _____ Health Record with Physical Form within last year
- _____ Kindergarten Form (if applicable)
- _____ Other