



TRADITION.  
INNOVATION.  
EXCELLENCE.

---

## STUDENT ENTRANCE INFORMATION AND CONSENT FORM

---

This form must be completed prior to the beginning of the school year for each student **upon their enrollment at Providence Heights Alpha School**. This form will be kept on file during a student's time at the school and does not need to be filled out each year unless information on the form or permissions for the student changes. The Diocese of Pittsburgh requires a demographic profile be submitted for Providence Heights Alpha School each year. Any demographic information you provide will be used solely to compile the demographic data requested by the Diocese. No names will be attached to the data, only overall school totals will be submitted. Please return the completed form (both pages) to the Alpha School front office.

---

### ***Pennsylvania Acts 195/90 Loan of Textbooks & Instructional Materials For Nonpublic Schools Students***

A private academic school which is licensed or registered with the Pennsylvania Department of Education, excluding nursery schools, can participate in the Acts 195/90 Programs, which is the purchase of textbooks and instructional materials. The Department issues allotments to the participating schools around July of each year to purchase textbooks and instructional materials for the following school year. Parents/Guardians are required to request this allocation.

I hereby request the loan of textbooks and instructional materials in accordance with Pennsylvania Act 195/90 for my children while attending Providence Heights Alpha School located in Allison Park, Allegheny County, Pennsylvania. This request applies unless revoked in writing.

---

Parent/Guardian Signature

---

Date

---

### ***Permission to Participate in Activities on the Grounds of the Alpha School/Sisters of Divine Providence Campus***

From time to time, students may participate in supervised activities outside the school building but on the grounds of the Alpha School/Sisters of Divine Providence campus. Examples of such activities may include science projects, art projects, adventure hikes and walks to other buildings for assemblies or other presentations. These activities can be held on the grassy areas in front or behind the school building, the cemetery, the playground and its grassy surround, the gym, Ketteler Center for Arts and Enrichment, Kearns Spirituality Center, and their surrounds including walks to La Roche College. This release applies unless revoked in writing.

\_\_\_\_\_ I/We give permission for my child to walk the grounds of the Alpha School/Sisters of Divine Providence in order to participate in education or enrichment activities during the regular school day.

\_\_\_\_\_ I/We **do not** give permission for my child to walk the grounds of Alpha School/Sisters of Divine Providence in order to participate in educational or enrichment activities during the regular school day.

---

Parent/Guardian Signature

---

Date

---



TRADITION.  
INNOVATION.  
EXCELLENCE.

---

---

### ***Home Language & Demographic Survey***

**Student Name:** \_\_\_\_\_

What was the first language your child learned to speak? \_\_\_\_\_

Does your child speak a language other than English? \_\_\_\_\_

What language(s) is/are spoken in your home? \_\_\_\_\_

*Please check the option that most applies to your family:*

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> American Indian/Native Alaskan | <input type="checkbox"/> Black                            | <input type="checkbox"/> White        |
| <input type="checkbox"/> Asian                          | <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Multi-racial |

*Please check the option that most applies to your family:*

- Hispanic  
 Non-Hispanic

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

---

### ***Permission to Participate in Physical Education and Swim***

Permission is hereby granted for my child to participate in all physical education and swim activities at Providence Heights Alpha School, less otherwise specified by my child's physician.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date