IMPORTANT DATES

09/1: APPLICATION OPENS
12/15: PRIORITY APPLICATION DEADLINE
03/16: REGULAR APPLICATION DEADLINE

INFORMATION SESSIONS
9/26: 4:30PM-6:30PM
12/5: 4:30PM-6:30PM
3/13: 4:30PM-6:30PM

APPLICATION WORKSHOPS
10/10: 4:30PM–6:30PM
11/7: 4:30PM–6:30PM

OPEN HOUSES
10/28: 11:00AM – 2:00PM
1/30: 5:30PM – 7:30PM
4/17: 5:30PM – 7:30PM

HIGH SCHOOL PLACEMENT TEST
1/12: 8:00AM–12:00PM
3/16: 8:00AM–12:00PM
6/19: 8:00AM–12:00PM

ADMISSIONS INTERVIEWS
12/17–12/18: 10:00AM–6:00PM
03/25–03/29: TBD

NECESSARY DOCUMENTS TO APPLY

Recommendation Letter from Principal
Recommendation Letter from Math + English Teacher
7th and 8th grade Report Card
State/STAR/Standardized Tests
2017 Federal Tax Returns and W2s

PRIVACY DISCLAIMER
Personal information collected here is for the use of Cristo Rey De La Salle only. Cristo Rey De La Salle does not share personal information with outside sources.

CONTACT INFORMATION
Admissions Director: Damien McDuffie
Admissions Coordinator: Eduardo Valencia
Phone: (510) 886-2256
Text: @b4agca to 81010 to receive updates/reminders!
Email: admissions@cristoreydelasdalle.org

FILL THE APPLICATION OUT ONLINE AT CRDLS.ORG/APPLY!
SECTION A: APPLICANT INFORMATION [PARENT FILLS OUT]

Student’s First Name: _________________________ Student’s Last Name: _________________________

Home Address: __________________________________________________________ Apartment/Suite: ___________

City: ______________________________ Zip Code: ________________ Home Phone: (          ) _______-

Language Spoken at Home: _____________ Birthplace: __________________ Date of Birth (MM/DD/YY): ___________

Applying For: 9th Grade 10th Grade

Racial Background: Latinx Black Asian/Pacific Islander American Indian Multiracial White
Other: _____________ Ethnic Origin/Nationality: ______________________________

Religious Affiliation: Catholic Christian (Non-Catholic) Muslim Buddhist Other None

Church/Mosque/Synagogue or Place of Worship Family Attends: ______________________________

SECTION B: SCHOOL INFORMATION

Current School: ______________________________ Years Attended at This School: _________________________

Type: Public Charter Catholic Private Assigned Public High School: ______________________________

List all schools applicant has attended since 6th Grade:

SECTION C: HEALTH AND EDUCATIONAL INFORMATION

Have you ever received counseling from a mental health practitioner (i.e therapist, psychiatrist)? Yes No Unsure

Have you ever had an educational evaluation? Yes No Unsure

Have you ever been tested for, or diagnosed with ADD or ADHD? Yes No Unsure

Are you now enrolled in an English Language Learner Program (ELL)? Yes No Unsure

Have you ever been suspended or expelled from any school district? Yes No Unsure

Have you ever repeated a grade? Yes No Unsure

If you have answered YES to any of the questions above, please explain:

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________
Question 1: At Cristo Rey De La Salle we live by these core principles – (1) Faith in the Presence of God, (2) Respect for All Persons, (3) Quality Education, (4) Inclusivity, (5) Concern for the Poor and Social Justice. In 250 Words, tell us why one or more of these principles is important to you.

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Question 2: In 50 words, tell us about one of your hobbies or interests (sports, dance, music, etc.):

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Question 3: In 50 words, what strengths and contributions do you believe you would bring to CRDLS?

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
FINANCIAL INFORMATION

SECTION A: PARENT/GUARDIAN #1

Parent/Guardian’s First Name: ____________________________ Parent/Guardian’s Last Name: ____________________________

Relationship:   Mother    Father    Legal Guardian    Other: ____________________________

Home Address: ________________________________________________ Apartment/Suite: ____________

City: ___________________________ Zip Code: ____________ Home Phone: (______) _______ - _______

Cell Phone: (______) _______ - _______ Work Phone: (______) _______ - _______ Email: ____________________________

Date of Birth (MM/DD/YY): ____________________ Preferred Language: ____________________________

Highest Level of Education Completed:   Grade School    High School/GED    Trade School    Associate’s Degree

Some College    Bachelor’s Degree    Post-Graduate

List All Jobs Held by Parent(s)/Guardian(s) Since January 1, 2018, Even if No Longer at this Job:

Work Status:   Employed    Unemployed    Retired    Self-Employed    Disabled

Title: ________________ Employer: __________________________  2017 Wages (1st Line of W2): $_________

Title: ________________ Employer: __________________________  2017 Wages (1st Line of W2): $_________

SECTION B: PARENT/GUARDIAN #2

Parent/Guardian’s First Name: ____________________________ Parent/Guardian’s Last Name: ____________________________

Relationship:   Mother    Father    Legal Guardian    Other: ____________________________

Home Address: ________________________________________________ Apartment/Suite: ____________

City: ___________________________ Zip Code: ____________ Home Phone: (______) _______ - _______

Cell Phone: (______) _______ - _______ Work Phone: (______) _______ - _______ Email: ____________________________

Date of Birth (MM/DD/YY): ____________________ Preferred Language: ____________________________

Highest Level of Education Completed:   Grade School    High School/GED    Trade School    Associate’s Degree

Some College    Bachelor’s Degree    Post-Graduate

List All Jobs Held by Parent(s)/Guardian(s) Since January 1, 2018, Even if No Longer at this Job:

Work Status:   Employed    Unemployed    Retired    Self-Employed    Disabled

Title: ________________ Employer: __________________________  2017 Wages (1st Line of W2): $_________

Title: ________________ Employer: __________________________  2017 Wages (1st Line of W2): $_________
SECTION C: HOUSEHOLD AND DEPENDENTS

Marital Status of Parent(s)/Guardian(s):  Married  Divorced  Separated  Remarried  Single  Widow

Whom Does the Applicant Live With?  Both Parents  Joint Custody  Mother  Father  Legal Guardian  Foster Care Provider  Grandparent  Other: ________________

List All Dependents (Line 6 on 1040A)

#1: First Name: __________________________ Last Name: __________________________ Birth Year (YYYY): ________

Does this dependent go to school?  Yes  No  Educational Costs of the Dependent: ,

#2: First Name: __________________________ Last Name: __________________________ Birth Year (YYYY): ________

Does this dependent go to school?  Yes  No  Educational Costs of the Dependent: ,

#3: First Name: __________________________ Last Name: __________________________ Birth Year (YYYY): ________

Does this dependent go to school?  Yes  No  Educational Costs of the Dependent: ,

#4: First Name: __________________________ Last Name: __________________________ Birth Year (YYYY): ________

Does this dependent go to school?  Yes  No  Educational Costs of the Dependent: ,

#5: First Name: __________________________ Last Name: __________________________ Birth Year (YYYY): ________

Total Household Size: ______

SECTION D: YEARLY COSTS, ASSETS

Monthly Welfare Income: ,  Monthly Food Stamps: ,  Monthly Social Security: ,

Monthly Child Support: ,  Monthly Alimony: ,  Miscellaneous Monthly Income: ,

IF YOU PAY RENT:  Monthly Rent: ,  Yearly Renter’s Insurance: ,

Yearly Electricity: ,  Yearly Gas, Oil, Coal: ,  Yearly Water, Sewage ,

IF YOU OWN A HOME:  Year of Purchase: ________  Purchase Price: , ,

Amount Owed: ,  Monthly Mortgage Payment: ,  Property Tax: ,

IF YOU OWN/LEASE CARS:  # Of Owned Vehicles: _____  Make of Vehicles: __________________________

Total Current Market Value: ,  Total Debt: ,  Yearly Insurance: ,

# of Leased Vehicles: __________  Total Monthly Lease: ,
2017 Medical Expenses: , 2017 Dental Expenses: ,

SECTION E: DEBT AND SUPPLEMENTARY QUESTIONS

Credit Card: , Bank Loan: , Family/Friends: ,
Education: , Other: ,

Does your family own a business? Yes No
Does either parent/guardian receive unemployment? Yes No
Does either parent/guardian receive worker’s compensation? Yes No
Do any other dependents (siblings) attend private school? Yes No
Is the Household expecting another child this year? Yes No
Are the parents in the process of a divorce or separation? Yes No
Has there been a recent death in the household? Yes No

How much can you contribute toward the tuition of the applicant next year?: / month

SECTION F: TERMS, CONDITIONS, AND SIGNATURES

I understand that Cristo Rey De La Salle East Bay High School is a Catholic Preparatory high school that combines personal responsibility, academic rigor, and a Corporate Work Study program to empower all students of all religions to reach their maximum potential. All students will adhere to an obligatory attendance, dress, and conduct code. Additionally, I understand that total participation of parents and guardians is necessary to complete with all requirements of the program.

Admission to Cristo Rey De La Salle East Bay is conditional to the applicant’s graduation. By signing below, I certify that the information provided in this application is complete and precise. I understand that personal information collected here is for the use of Cristo Rey De La Salle only; Cristo Rey De La Salle does not share personal information with outside sources.

I understand that the applicant must be available to attend and must complete Alpha Summer Institute from July XX to July XX 2018. (Subject to change.)

Signatures:

Parent/Guardian: ___________________________________________ Date:___________________

Student: __________________________________________________ Date:___________________