



St. Rose of Lima Academy

52 Short Hills Avenue Short Hills, NJ 07078
973-379-3973



Accredited by the Middle States Association of Colleges and Schools Commission on Elementary Schools
Distinguished Recipient of the Excellence in Education Blue Ribbon Award

2025-2026 REGISTRATION PACKET

Welcome to Saint Rose of Lima Academy. Thank you for considering us as your choice to educate your child(ren). The following steps are needed to be registered at Saint Rose of Lima Academy.

New families:

- Completed Registration packet
- Birth certificate
- Baptismal certificate (if applicable)
- Proof of immunization records and physical
- Most recent report card
- Most recent standardized test scores
- Registration payment
- Create account on Blackbaud Tuition Management
- Create PowerSchool profile
- Tuition deposit (applied towards tuition total)

Returning Families:

- Completed registration packet
- Registration payment
- Tuition deposit (applied towards tuition total)

***Returning students not registered by March 1, will be assessed a late fee of \$200.00**

TUITION & FEES

Tuition

Grade	Active Parishioner	Non Parishioner
2.5 year olds beginning in September 8:30am-11:25am 3 days: Monday, Wednesday and Friday	\$4,322.00	\$4,838.00
2.5 year olds beginning in September 8:30am-11:25am 5 days: Monday through Friday	\$5,688.00	\$6,202.00
2.5 year olds beginning in January 8:30am-11:25am 3 days: Monday, Wednesday and Friday	\$2,963.00	\$3,252.00
2.5 year olds beginning in January 8:30am-11:25am 5 days: Monday through Friday	\$3,782.00	\$4,092.00
3 year olds 8:30am-2:25pm 3 days: Monday, Wednesday and Friday	\$5,688.00	\$6,438.00
3 year olds 8:30am-2:25pm 5 days: Monday through Friday	\$6,718.00	\$7,468.00
4 year olds 8:30am-2:25pm Monday through Friday	\$6,923.00	\$7,673.00
Grades: K through 8 1 child	\$7,918.00	\$10,228.00
Grades: K through 8 2 children	\$15,289.00	\$19,435.00
Grades: K through 8 3 children	\$22,014.00	\$27,654.00

Fees

Fees	Total
Registration (All grades)	\$300.00 per family
Tuition deposit (All grades)	\$500.00 per family
8 th Grade Fees (8 th Grade ONLY)	*
HSA Dues (Grades K-8 ONLY) 1 Child (due November)	\$125.00
HSA Dues (Grades K-8 ONLY) 2 Children (due November)	\$150.00
HSA Dues (Grades K-8 ONLY) 3 Children (due November)	\$175.00
HSA Raven Fund (Grades K-8 ONLY) due February/March	\$325.00
Technology fee (Grades K-8 ONLY)	\$125.00 per student
Aftercare (1 child)	\$25.00 per day
Aftercare (2 children)	\$35.00 per day
Aftercare (Unlimited)	\$3,800.00 per child
Athletics	*
Field trips	*

*Varies upon student count

HSA Dues: Funds class parties, teacher appreciation and special events.

HSA Raven Fund: Contributes to the annual commitment of \$95,000 that the Archdiocese expects from the HSA to help keep SRLA up and running: operations, additional hours for a school nurse, and facility improvements.

2025-2026 TUITION AGREEMENT

The purpose of this agreement is established between St. Rose of Lima Parish (the “Parish”) and the parents of children enrolled in St. Rose of Lima Academy (the “Academy”), the following: (1) the terms and payment schedule of tuition and other fees applicable to the enrollment of children in the Academy and (2) the responsibilities of parents to the Parish at large. In consideration of the acceptance of this contract by the Academy, please initial below:

_____ TUITION: Saint Rose of Lima Academy uses Blackbaud Tuition Management to assess and collect tuition/fees. Payments towards your financial account are NOT accepted in the main office. All tuition payments must be made through Blackbaud Tuition Management. Accepted payments of methods are checking/savings accounts (no additional charge), credit cards (2 1/2% charge). You have the option of having payments automatically withdrawn or invoice. Tuition is paid in 10 installments beginning June 2024 and ending in March 2025. You can also set your tuition to be paid in 2 or 4 installments. This is done by the parent/guardian when creating their account on Blackbaud Tuition Management. There is a 2% discount if you pay tuition by June 2025. Added in your first payment will be a usage fee (\$40.00) which includes the use of one (1) account per family for the academic year.

_____ PARISHIONER VS NON PARISHIONER RATES: If a parent/guardian belongs to Saint Rose of Lima Church, they pay a parishioner rate. All parents/guardians that do not belong to Saint Rose of Lima Church are required to pay the full rate. In order to be eligible for the parishioner rate, you must provide a letter from the church’s office attesting that you belong to the church.

_____ FEES: There is a non-refundable registration fee of \$300.00 per family due upon registration, no exceptions. In the event that the financial account becomes delinquent, the Academy may refuse to release ANY school document (progress reports, report cards, transcripts, letters of recommendation etc). If the financial account becomes delinquent by more than one month, the school may suspend my child(ren) until the account is brought current. It is understood that individual circumstances can arise in which a parent may be unable to fulfill his or her financial obligations to the Academy due to a loss of a job or otherwise. If a parent is in a situation in which he or she is unable to make tuition payments, he or she is asked to contact the Principal to work out an alternative plan to fulfill the tuition obligation. Fundraising is mandatory for all families. The 8th grade fee of is assessed to ALL 8th grade students. This fee includes: graduation preparation this includes party, supplies, trip, cap and gowns. All returning students not registered by March 1, 2025 will be assessed a fee of \$200.00.

_____ WITHDRAWAL FROM SCHOOL: The withdrawal policy stated here are made necessary by the hiring commitments and purchase of classroom materials (books and workbooks) which the Academy must make prior to the commencement of the academic year. Should I for any reason, withdraw my child or children from the Academy prior to the commencement of, or during, the academic year, I hereby acknowledge and agree that I will continue to be responsible for the payment of the following amounts of tuition, whether or not my child ultimately matriculates:

- April 1, 2024 through June 30, 2025 – 1/3 of the total amount of tuition due for the year
- July 1, 2024 through August 15, 2025 – 2/3 of the total amount of tuition for the year
- After August 16, 2025 – 100% of the total amount of tuition for the year

_____ ACCEPTABLE USE AGREEMENT FOR THE USE OF TECHNOLOGY: The use of computer services at St. Rose of Lima Academy is a privilege, not a right. Students are expected to make responsible, ethical and appropriate use of computers and information services at all times. Students should realize that these services are finite and costly and that such things as time, money and hardware are wrongfully restricted or appropriated when these services are abused. Students may use only their password, not reconfigure or tamper with the network system in any way, or attempt to access or alter files without proper authority. Students may not unlawfully copy software/information or use illegal software. Students must cite properly from electronic sources and used in their assignments. Students are held responsible for all activity conducted on his/her account or under his/her password. Students may not run non-instructional computer games on any school owned computer, server or network system. Students may not use non-school software, disk drives, computers or other equipment unless cleared to do so by the school technology coordinator/administrator. Failure to comply with these standards or acceptable use of St. Rose of Lima Academy’s technology will result, in the very least, in suspension or withdrawal of network privileges.

This agreement will become effective as of the date signed below. By signing this agreement, I agree to be bound by its terms. This agreement must be signed by a parent or legal guardian.

All fields are required, if not applicable, please type N/A

CONTACTS AND MEDICAL INFORMATION

Student(s) Information

Child 1	Child 2	Child 3
Grade:	Grade:	Grade:
D.O.B: mm/dd/yyyy: 01/01/2001	D.O.B: mm/dd/yyyy: 01/01/2001	D.O.B: mm/dd/yyyy: 01/01/2001

Address: _____ Child(ren) resides with: _____
Street, city, state and zip code

Parent/Guardian Information

Father:	Mother:	Guardian:
Phone:	Phone:	Phone:
Email:	Email:	Email:

Emergency Contacts Information

Please list the names of the of people who are able to pick up your child(ren). All emergency contacts must be 18 years or older and must provide ID. For additional contacts or updates to the contacts below, please send information in writing to info@stroseshorthills.org

#1 Name: _____ Phone: _____
#2 Name: _____ Phone: _____
#3 Name: _____ Phone: _____
#4 Name: _____ Phone: _____
#5 Name: _____ Phone: _____

Medical Information

If your child has any special needs, allergies, health concerns or medication(s) dosage administered, please indicate:

In case of accident or serious illness, I request that the St. Rose of Lima Academy Staff contact me using the authorization provided on this form. If the staff is unable to reach me, I hereby authorize the St. Rose of Lima Academy Staff to call the physician indicated below and to follow his or her instructions. If it is impossible to reach this physician the St. Rose of Lima Academy Staff may make any and all appropriate arrangements deemed necessary, including transporting my child to an emergency room by means of an ambulance.

Name of Physician: _____ Phone Number: _____

Address: _____
Street, city, state and zip code

ARCHDIOCESE REPORTING

Photography/ Videography Consent

**PHOTOGRAPHY/VIDEOGRAPHY CONSENT FORM FOR USE BY SCHOOLS
AND FOR SUBMISSIONS TO THE ARCHDIOCESE OF NEWARK**

I, _____

hereby authorize Saint Rose of Lima Academy, 52 Short Hills Ave. Short Hills New Jersey and the Roman Catholic Archdiocese of Newark (the "Archdiocese"), 171 Clifton Avenue, Newark, New Jersey, to use

Name(s) of students

name and likeness in any photograph(s)/video(s) from this date, September 29th, 2022 forward. I understand and agree that any photograph(s)/video(s) shall exclusively be the property of, and the right, title, and interest of the School and the Archdiocese, for use including, but not limited to, the School's and the Archdiocese's print, video, online, and electronic promotional materials. I further agree and acknowledge that the School and the Archdiocese have made no representation or promise to me regarding the quality or editing of any photograph(s)/video(s) taken. I hereby release and hold harmless the School and the Archdiocese from any reasonable expectation of privacy or confidentiality associated with the images specified above. I acknowledge and agree that the minor's participation is voluntary; he/she will receive no financial compensation. I acknowledge and agree that publication of said photograph(s)/video(s) confers no rights of ownership or royalties whatsoever. I hereby irrevocably authorize the School and the Archdiocese to edit, copy, exhibit, publish or distribute any photograph(s)/video(s) for purposes of publicizing the School's and the Archdiocese's programs or for any other related, lawful purpose. I waive the right to inspect or approve the finished product, including written or electronic copy, wherein the minor's likeness appears. I grant to the School and the Archdiocese permission to publish the minor's name and use the minor's likeness from the photograph(s)/video(s) taken. This permission extends to the School and the Archdiocese and any subsequent party that the School or the Archdiocese may designate that is involved in the production, reproduction, and distribution of the photograph(s)/video(s). I hereby release and hold harmless the School, the Archdiocese, their respective contractors, employees, and any related third parties from all actions, claims, damages, costs, and/or expenses, including attorney's fees, brought by myself, the minor, and/or the parent/guardian, which relate to, or arise out of, any use of the photograph(s)/video(s) as specified above. I have read the above terms and conditions contained in this consent. I understand the contents of this consent and that I am waiving and relinquishing all rights that I may have as set forth above. I also understand that this consent will remain in effect unless and until revoked by me in writing and communicated to the school.

Authorization Parent Guardian Signature: _____

Census: Race and Religion

For reporting purposes by the central office of the Archdiocese of Newark, please complete the section below.

Student race:

Student Religion:

SURVEY OF LOW-INCOME CHILDREN FOR TITLE 1 PURPOSES

Dear Parents and Guardians,

We need your help! St. Rose of Lima Academy has an opportunity for the children who really need extra academic support to receive it through the Title I program under Every Student Succeeds Act, but we can't do it without YOU! These extra services will only come to the children if you fill out the survey below. Services such as extra assistance in reading and math, teacher professional development, and parent activities may be available through the support of the Title I program.

In order to determine the funding available for this wonderful program, we must have an accurate count of children from low-income families. I want to assure you that your privacy will be protected and that no names are required on this family survey. Only the address and grade levels are provided to the school district so that its staff members can determine the funding for the Title I program for the eligible children.

Thank you for giving this your immediate attention. If you have any concerns or questions, please call me at 973-379- 3973 or email me at principal@srlacademy.org.

Sincerely,

Tina Underwood

Principal

Survey of Low-Income Children for Title I Purposes

Family Name: _____

Age of grade level children living in your household and attending St. Rose of Lima: _____

Locate your household size and the income earned each year:

Family Size	Income Earned Each Year
1	\$23,828
2	\$32,227
3	\$40,626
4	\$49,025
5	\$57,424
6	\$65,823
7	\$74,222
8	\$82,621
For each additional family member, add \$8,399	

My family's yearly income is equal to or less than this amount.

If your child(ren) did not attend private school, which public school would he/she be assigned:

Thank you for your assistance and attention in completing this survey!

Nonpublic School Transportation Application Form

School Year: 2024-2025 Resident District Board of Education:

Student Name:

Last

First

Middle

Date of Birth (mm/dd/yy):

Parent/Guardian Name:

Daytime Phone:

Email Address:

Area code + number

Home Address:

City:

Zip:

Mailing Address:

City:

Zip:

Full name of school to be attended: Saint Rose of Lima Academy

Phone: 973-379-3973

Address of School: 52 Short Hills Avenue, Short Hills, NJ 07078

Area code + number

Student's grade for the coming year: _____

Shortest one-way mileage between home and school: _____

(shortest route along public roadways or walkways to the nearest tenth of a mile)

Date school opens (mm/dd/yy): September 2024

Date school closes (mm/dd/yy): June 2025

School hours:

7:50 AM to

2:50 PM

Name of school of attendance in prior year: _____

Address: _____

Signature: _____

Date (mm/dd/yy): _____

Public School Use Only (Do not write below this line)

Your application has been reviewed by the resident district board of education. The following determination has been made:

Transportation will be provided

You are eligible for payment in lieu
of transportation

Ineligible

Reason: _____

Title: _____

Signature: _____

Date (mm/dd/yy): _____

Nonpublic School Transportation Application Form

School Year: 2024-2025 Resident District Board of Education:

Student Name:

Last

First

Middle

Date of Birth (mm/dd/yy):

Parent/Guardian Name:

Daytime Phone:

Email Address:

Area code + number

Home Address:

City:

Zip:

Mailing Address:

City:

Zip:

Full name of school to be attended: Saint Rose of Lima Academy

Phone: 973-379-3973

Address of School: 52 Short Hills Avenue, Short Hills, NJ 07078

Area code + number

Student's grade for the coming year: _____

Shortest one-way mileage between home and school: _____

(shortest route along public roadways or walkways to the nearest tenth of a mile)

Date school opens (mm/dd/yy): September 2024

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Name of school of attendance in prior year: _____

Address: _____

Signature: _____

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You are eligible for payment in lieu of transportation

Ineligible

Reason: _____

Title: _____

Signature: _____

Date (mm/dd/yy): _____

Nonpublic School Transportation Application Form

School Year: 2024-2025 Resident District Board of Education:

Student Name:

Last

First

Middle

Date of Birth (mm/dd/yy):

Parent/Guardian Name:

Daytime Phone:

Email Address:

Area code + number

Home Address:

City:

Zip:

Mailing Address:

City:

Zip:

Full name of school to be attended: Saint Rose of Lima Academy

Phone: 973-379-3973

Address of School: 52 Short Hills Avenue, Short Hills, NJ 07078

Area code + number

Student's grade for the coming year:

Shortest one-way mileage between home and school:

(shortest route along public roadways or walkways to the nearest tenth of a mile)

Date school opens (mm/dd/yy): September 2024

Date school closes (mm/dd/yy): June 2025

School hours:

7:50 AM to

2:50 PM

Name of school of attendance in prior year:

Address:

Signature:

Date (mm/dd/yy):

Public School Use Only (Do not write below this line)

Your application has been reviewed by the resident district board of education. The following determination has been made:

Transportation will be provided

You are eligible for payment in lieu of transportation

Ineligible

Reason:

Title:

Signature:

Date (mm/dd/yy):

DOCUMENT UPLOAD – NEW STUDENTS ONLY

NEW STUDENTS ONLY

Please upload the following:

Birth certificate	
Baptismal certificate (if applicable)	
Proof of immunization records	
Physical	
Most recent report card	
Most recent standardized test scores	