

# St. James Episcopal School

2024 – 2025

A Parish Day School of  
St. James the Apostle Episcopal Church

## **Registration and Enrollment Packet**



**EDUCATING THE WHOLE CHILD;  
MIND, BODY, AND SPIRIT**

1803 Highland Hollow Drive  
Conroe, TX 77304  
[www.stjames-conroe.org/school](http://www.stjames-conroe.org/school)

Phone (936) 756-4984  
Fax (936) 756-8850



## St. James Episcopal School Logo

### Our Mission Statement

St. James Episcopal Day School strives to offer an exemplary educational program that emphasizes the training and development of the whole child: spiritually, academically, morally, emotionally, and physically.

### Our Purpose

To provide a Christ-centered learning experience that supports the overall development of each child's mind, body, and spirit.

### Our Vision

To be the premier, self-sustainable early educational program for young children in and around Conroe, Texas.

### Our Goals

1. To **create** within each child a love of Christ.
2. To **provide** a Christ-centered environment that encourages natural participation, exploration, curiosity, and aesthetic appreciation.
3. To **foster** an atmosphere of academic excellence.
4. To **develop** an awareness and appreciation for the world God gave us.
5. To **encourage** each student as an individual to live a creative and compassionate life pleasing to God.
6. To work in **partnership** with parents and community members to maximize learning.

### Philosophy

The school offers an academic program within a Christian environment, which strives to meet the diverse needs of our students. The staff and administration endeavor to foster in each child a growing awareness of God's love and to encourage the child to relate with confidence and love toward people within our school, community, and world.



# St. James Episcopal School

Dear Families,

Thank you so much for your interest in St. James Episcopal School in Conroe, Texas. We are gearing up for the 2024 – 2025 school year with enthusiasm and excitement.

This is St. James Episcopal School's 53<sup>rd</sup> year to educate children in the Conroe area. We are known for our exemplary educational program, experienced staff, beautiful environment, and nurturing atmosphere for students and parents. Our main objective is to educate the whole child; mind, body, and spirit! St. James Episcopal Day School delivers curriculum based instruction within a loving, caring Christian environment. Children and families of all faiths and backgrounds are welcome!

The following items are required as soon as possible so that we may secure a space for your child:

- Completed Enrollment Packet
- Annual Registration Fee
- Shot records with current immunizations.
- First month's tuition is due by August 1<sup>st</sup>

Our St. James family continues to grow and thrive because our parents share their love for our school and help to recruit new students. As a token of appreciation, St. James Episcopal School will issue a \$500 credit to each additional child in a family and for referrals of new students. Inquire in the office for further details.

We look forward to getting to know your family and encouraging your child in the process of becoming a life-long learner. If you have any additional questions, please feel free to call the school at (936)756-4984 or email me at [tjones@stjames-conroe.org](mailto:tjones@stjames-conroe.org).

Respectfully,

Taylor Jones  
Head of School

1803 Highland Hollow Dr., Conroe, TX 77304  
Phone: 936.756.4984 ♦ [stjames-conroe.org/school](http://stjames-conroe.org/school)

## St. James Episcopal School Enrollment Agreement Form 2024 – 2025

St. James Episcopal School is a non-profit organization, an outreach of St. James the Apostle Episcopal Church; which is part of the Protestant Episcopal Church. St. James offers a rigorous academic program which is child-centered, age appropriate and based on Christian values. The school accepts all students without regard for race, sex, religion, or ethnic origin; we believe that each child is created in the likeness of God.

***Enrollment is for the full academic year and parents accept the responsibility for the full annual tuition, as our staffing and salaries are based on enrollment and tuition. A goal for St. James School is to maximize staff placement and efficiently utilize our classroom spaces, while maintaining our small student to teacher ratios. If you choose to unenroll your child from SJES prior to the end of the month, tuition is still to be paid in full as there will be no pro-rating of any kind.*** Your application will be processed upon receipt of the enrollment contract, payment of **non-refundable** registration fee per student and submission of completed enrollment forms. For these reasons, we are only offering the weekly options listed below. St. James teachers are devoted to providing a rich learning environment for each student. A variety of factors will be taken into consideration when placing each child in a classroom.

We have read and agree to this contract and hereby apply for \_\_\_\_\_ (please print) to attend St. James Episcopal School for the 2024-2025 school year. (Student's Name)

<b>Infants</b> (6 weeks to 12 months) 5 days: <input type="checkbox"/> M-Tu-W-Th-F	<b>Tiny Tots</b> (12 months to 23 months) 3 days: <input type="checkbox"/> M-W-F 5 days: <input type="checkbox"/> M-Tu-W-Th-F	<b>Beginners</b> (2 years by 9/1) 2 days: <input type="checkbox"/> Tu-Th 3 days: <input type="checkbox"/> M-W-F 5 days: <input type="checkbox"/> M-Tu-W-Th-F
<b>Intermediates</b> (3 years by 9/1) 3 days: <input type="checkbox"/> Tu-W-Th 5 days: <input type="checkbox"/> M-Tu-W-Th-F	<b>Pre-K</b> (4 years by 9/1) 4 days: <input type="checkbox"/> M-Tu-W-Th 5 days: <input type="checkbox"/> M-Tu-W-Th-F	<b>Morning Care</b> Beg/Int/Pre-K <input type="checkbox"/> 6:30am – 8:15am (Daily Rate Applies) <input type="checkbox"/> As Needed (Daily Rate Applies)
<b>Extended Care</b> Beginners <input type="checkbox"/> 1pm – 4pm (Mornings Included) <input type="checkbox"/> 1pm – 6pm (Mornings Included) <input type="checkbox"/> As needed (Daily Rate Applies)	<b>Extended Care</b> Intermediates <input type="checkbox"/> 1pm – 4pm (Mornings Included) <input type="checkbox"/> 1pm – 6pm (Mornings Included) <input type="checkbox"/> As needed (Daily Rate Applies)	<b>Extended Care</b> Pre-Kindergarten <input type="checkbox"/> 2pm – 4pm (Mornings Included) <input type="checkbox"/> 2pm – 6pm (Mornings Included) <input type="checkbox"/> As needed (Daily Rate Applies)

How did you hear about St. James School? \_\_\_\_\_

Child's Name: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_ Child's Age on 9/1/2024 \_\_\_\_\_

Parents' Names: \_\_\_\_\_ Married / Separated/ Divorced

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephones - Home: \_\_\_\_\_ Mom: \_\_\_\_\_ Dad: \_\_\_\_\_

Email- Mom: \_\_\_\_\_ Dad: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRATION FEE**  
 Check Enclosed **OR**  Charge my Procure account.

**TUITION**  
 Check: Pay In Full Due by 8/1/2024  
 10 monthly installments through Procure (Aug-May)

**Office Use Only:**  
APPLICATION APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_ AMT REC: \_\_\_\_\_ BAL DUE \_\_\_\_\_

# St. James Episcopal School

# Tuition and Fees 2024-2025

Class	Days per Week	Yearly Tuition (Single Payment)	Monthly Payment Plan (10 month INSTALLMENT)*	Annual Registration Fee
<b>Infants</b> (6 weeks – 12 months) 6:30am-6pm	5 Days M-Tu-W-Th-F	\$10,620	\$1,095	\$500
<b>Tiny Tots</b> (12 months – 23 months) 6:30am-6pm	3 Days M-W-F	\$7,510	\$775	\$500
	5 Days M-Tu-W-Th-F	\$9,650	\$1,065	\$500
<b>Beginners</b> (2 year olds) 8:30am-1pm	2 Days Tu-Th	\$3,635	\$385	\$500
	3 Days M-W-F	\$4,435	\$455	\$500
	5 Days M-Tu-W-Th-F	\$5,575	\$580	\$500
<b>Intermediates</b> (3 year olds) 8:30am-1pm	3 Days Tu-W-Th	\$4,410	\$455	\$500
	5 Days M-Tu-W-Th-F	\$5,580	\$580	\$500
<b>Pre-Kindergarten</b> (4 year olds) 8:30am-2pm	4 Days M-Tu-W-Th	\$5,290	\$545	\$500
	5 Days M-Tu-W-Th-F	\$5,670	\$585	\$500
<b>Extended Care</b>	<u>Daily Rate</u> Morning \$10 Afternoon \$30	<u>Beginner's</u> \$320 (1-4) \$375 (1-6)	<u>Intermediates</u> \$320 (1-4) \$375 (1-6)	<u>Pre-K</u> \$320 (2-4) \$375 (2-6)



# Student Emergency Information Card

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Enrollment Date: \_\_\_\_\_ Birth date: \_\_\_\_\_ Sex: M F Ethnicity: \_\_\_\_\_

Student lives with (circle one): both parents, father only, mother only, other \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ C: \_\_\_\_\_

W: \_\_\_\_\_ Place of employment: \_\_\_\_\_

Email: \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ C: \_\_\_\_\_

W: \_\_\_\_\_ Place of employment: \_\_\_\_\_

Email \_\_\_\_\_

## In case of emergency, call:

**Emergency Contact 1:** Name: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mailing address: \_\_\_\_\_

**Emergency Contact 2:** Name: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mailing address: \_\_\_\_\_

## In the event I cannot be reached to arrange for emergency medical care, I authorize the person in charge to take my child to:

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I give consent for SJES to secure any and all necessary emergency medical care for my child.

## Names of people that may pick my child up from school:

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**St. James Episcopal School**  
**Tuition Payment Agreement Form**

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

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**TUITION**

Tuition for Infants and Tiny Tots covers all day care (6:30am – 6pm). For students in Beginners, Intermediates, or Pre-K, tuition rates cover classroom instruction only (8:30am – 1pm for Beginners and Intermediates, and 8:30am – 2pm for Pre-K). Extended Care costs are an additional cost and details will follow on an additional page.

**FEES**

The school year at St. James is based on a 10 month term. Therefore, tuition payments are made either in full by August 1<sup>st</sup> or in 10 monthly installments beginning in August and ending in May. If not paid in full, tuition **MUST** be paid electronically via Procure Tuition Express Software **If you choose to unenroll your child from SJES prior to the end of the month, tuition is still to be paid in full as there will be no pro-rating of any kind. \*NO EXCEPTIONS!** All Extended Care payments will also be billed monthly through Procure.

Tuition for the 2024 – 2025 school year will be paid in the following manner (select one):

- Payment in full** – This payment may be made directly to the school by check and reflects an approximate 3% discount.
- Payment through Procure** –
  - Automatic Bank Payments through your checking or savings. Payments are scheduled for the 20<sup>th</sup> of the month (10 monthly installments August to May).
  - Automatic credit card withdrawal (MasterCard, Visa, American Express, or Discover) THIS OPTION WILL INCUR AN ADDITIONAL 2.7% FEE PER TRANSACTION.

I agree to make tuition payments for the 2024 – 2025 school year according to the option I have selected above. I understand the financial commitment to the school is for the entire 2024 – 2025 school year.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# St. James Episcopal School

## Extended Care Enrollment Agreement Form

\_\_\_\_\_ I will **not** be using St. James Extended Care Program at this time.

*(In which case, please sign below and continue with the next page of the application.)*

Please read and initial the following statements:

\_\_\_\_\_ I understand that the St. James Extended Care Program is open only to students enrolled in St. James Episcopal School during the regular school year.

\_\_\_\_\_ I understand that the St. James Extended Care Program operates only on days when St. James Episcopal School is in session.

\_\_\_\_\_ I understand that if I use Extended Care (monthly or daily) I will be **billed monthly on Procure** along with my tuition.

\_\_\_\_\_ I further understand that **my child must be picked up by 6:00 pm or a \$25 late fee will be charged for the first minute and \$1 for each additional minute.** The extended day worker will have the clock and the fee is due at the time of late pick up.

If your family will use the St. James Extended Care Program on a regular basis, the Monthly Payment Option is the best choice financially for your family as it offers substantial savings. It also benefits the school in adequate planning such as scheduling staff, planning activities and purchasing supplies and snacks.

**Monthly Options:** (please check the option you are choosing)

- |   |              |                                  |
|---|--------------|----------------------------------|
| <input type="checkbox"/> All Students         | 6:30-8:30 am | (included in Extended Care Plan) |
| <input type="checkbox"/> Beginner             | 1:00-4:00 pm | \$350.00 per month               |
| <input type="checkbox"/> Beginner             | 1:00-6:00 pm | \$385.00 per month               |
| <input type="checkbox"/> Intermediate         | 1:00-4:00 pm | \$320.00 per month               |
| <input type="checkbox"/> Intermediate         | 1:00-6:00 pm | \$375.00 per month               |
| <input type="checkbox"/> Pre-K & Kindergarten | 2:00-4:00 pm | \$320.00 per month               |
| <input type="checkbox"/> Pre-K & Kindergarten | 2:00-6:00 pm | \$375.00 per month               |

Students may bring a ready to eat breakfast to Morning Extended Care if they choose; items must be easily cooked and/or heated.

In consideration of the acceptance of this reservation for St. James Extended Care Program by St. James Episcopal School, the undersigned agrees to pay the required fees as specified on the schedule of payments.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Health Requirements Form

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

ADMISSION REQUIREMENT: **One of the following** must be presented when child is admitted into St. James Episcopal School or within one week of admission. Check to indicate the option you select:

DOCTOR'S STATEMENT: I have examined the above named child within the past year and find that he/she is physically able to take part in the day care program.

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- A signed and dated copy of a health care professional's statement is attached.
- Medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization, which I adhere to or am a member of. I have attached a signed and dated affidavit stating this.
- My child has been examined within the past year by a health care professional and is able to participate at SJES. Within 12 months of admission, I will obtain a health care professional's signed statement and submit it to SJES.

## Health Information Form

Physician: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

- Are there any physical, emotional or medical concerns of which the school should be aware? Y N  
If yes, please explain: \_\_\_\_\_
- Has there been any illness or change in the usual routine or environment recently that may have affected your child? Y N If yes, please explain: \_\_\_\_\_
- Is your child on routine medication? Y N If yes, what? \_\_\_\_\_
- Allergies:  
Food: \_\_\_\_\_  
Other: \_\_\_\_\_
- Emotional Development:  
Fears? \_\_\_\_\_ Jealousy? \_\_\_\_\_ Thumb-sucking? \_\_\_\_\_
- Birth weight? \_\_\_\_\_
- Full Term? Y N
- How old was your child when he/she walked? \_\_\_\_\_

Is your child (check applicable) right-handed? \_\_\_ left-handed? \_\_\_ Not sure at this time? \_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# St. James Episcopal School

## General Information

Name of Child: \_\_\_\_\_

Religion: \_\_\_\_\_ Church Attend: \_\_\_\_\_

Schools child has **previously attended**:

Name	Address	Telephone

Other children in the family:

Name	Age	School/Grade

Are parents divorced? Y N Separated? Y N Names of step parents? \_\_\_\_\_

In the event of divorce, is there a custody agreement in place? Y N  
(Please attach all legal documentation regarding who can legally pick up your child, if applicable)

Other significant information that might be added: \_\_\_\_\_

Your child will be released only to you (parents) or other persons designated on the Student Emergency Information Card. Parents or other designated persons bringing the child to class should make sure that a staff member is aware of the child's arrival and departure. Please list persons to whom you want your child to be released other than yourself. **The school must be notified in advance and in writing if someone not listed is to pick up your child.** Individuals listed should be notified that they will be asked for identification before your child is released to them. Each child enrolled is required to have at least one emergency contact on file other than the parent's information.

## General Information (cont'd):

- Is your child potty trained? Y N
  - Children in the 3 year old class and above are required to be potty trained
- Would you describe your child's activity level as (check applicable)  
\_\_\_\_\_ active \_\_\_\_\_ average \_\_\_\_\_ quiet
- Are your child's playmates (check applicable)  
\_\_\_\_\_ older? \_\_\_\_\_ younger? \_\_\_\_\_ same age?
- How does he/she get along with playmates? \_\_\_\_\_
- I give consent for my child to participate in the following water activities (Check all that apply).
  - water table play
  - sprinkler play
  - splashing or wading pools
  - aquatic playgrounds
- Is your child able to swim without assistance?
  - Yes
  - No
- Does your child have any physical, health, behavioral or other condition that would put them at risk while swimming?
  - Yes
  - No
- Does your child sleep in his or her own bed? Y N If no, where do they sleep? \_\_\_\_\_
- Do you object to your child's participation in religious activities such as birthday blessings at the altar, Thanksgiving sharing service, imposition of ashes on Ash Wednesday, etc.? Y N  
If yes, please explain: \_\_\_\_\_
- What sort of activities does your child enjoy? \_\_\_\_\_
- Rank in order of your child's preferences 1 – 4 (1 being the highest and 4 being the lowest):  
\_\_\_\_\_ Read a book \_\_\_\_\_ Play a video game \_\_\_\_\_ Watch TV \_\_\_\_\_ Play outside
- Are any other languages other than English spoken in the home? Y N  
If yes, what? \_\_\_\_\_
- Why are you interested in your child attending St. James?  
\_\_\_\_\_  
\_\_\_\_\_
- Is there anything else you would like to tell us about your child?  
\_\_\_\_\_  
\_\_\_\_\_

# St. James Episcopal School

## Release Forms

Student's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_

---

### Media Recording Release Form

I, the undersigned, do hereby grant or deny permission to St. James the Apostle Church and School, Conroe to use my image as marked by my selection below. Such use includes the display, distribution, publication, transmission, or other use of photographs, images, and/or video taken of me/or my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the St. James Episcopal Church and School, Conroe web site.

- Yes, I grant permission to use my image in print, video, and digital media. I agree that these images may be used by St. James the Apostle Episcopal Church and School, Conroe for a variety of purposes and that these images may be used without further notifying me. I do understand that me or my child's name will not be used in conjunction with any video or digital images.
- Yes, I grant permission to use my image in print, video, and/or digital media for the St. James Apostle Episcopal School, Conroe, TX's social media platform (i.e. Facebook, Instagram, etc.) I do understand that me or my child's name will not be used in conjunction with any video or digital images.
- No, I deny permission to use my image at all.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

### Parent Handbook/Policy and Procedure Manual Acknowledgement Form

The State Licensing Agency requires parents to acknowledge they have received and understand all policies and procedures outlined throughout the SJES Parent Handbook in its entirety. Please sign and date below. *\*Below are a few of our most referred to policies and procedures. Please be familiar with the Parent Handbook.*

- Guidance and Discipline Policy – pg. 7
- Extended Care Policy – pg. 10
- Tuition and Payment Policy – pg. 5
- Illness and Communicable Disease Outbreak Policy – pg. 11

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

**Field Trips** (check) \_\_\_ I **do** consent for my child to participate \_\_\_ I do **not** give consent to participate

**Water Activities:** I give consent for my child to participate in the following water activities when appropriate:

- Water Table Play
- Sprinkler Play
- Wading/Splashing Play
- None

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---



AUGUST 2024						
S	M	T	W	TH	F	S
			1	2	3	
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

SEPTEMBER 2024						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

OCTOBER 2024						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

NOVEMBER 2024						
S	M	T	W	TH	F	S
				1	2	
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

DECEMBER 2024						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

JANUARY 2025						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

FEBRUARY 2025						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

MARCH 2025						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

APRIL 2025						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

MAY 2025						
S	M	T	W	TH	F	S
			1	2	3	
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

JUNE 2025						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

JULY 2025						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

**Holidays**

Labor Day.....	September 2
Columbus Day.....	October 14
Thanksgiving Break...	Nov 25-29
Christmas Break.....	Dec 23-6
MLK Day.....	January 20
President's Day.....	February 17
Spring Break.....	March 10-14
Good Friday.....	April 18
Memorial Day.....	May 26

**Student Early Release**

December 20
May 23

**Staff Development Days**

August 6-9
January 6

**Holiday** (Blue square)

**Early release** (Light blue square)

**Event** (Light blue square)

**Staff Dev. (no students)** (Light blue square)

**PA Meeting** (Yellow square)

**STUDENTS**

Starting Date	August 12
Ending Date	May 23

**STAFF**

Starting Date	August 6
Ending Date	May 27

**Days of Instruction**

Students - 179	Staff - 185
----------------	-------------

**SCHOOL EVENTS**

*\*Dates are subject to change at any time.*

**AUGUST**

- AUGUST 10 - MEET THE TEACHER BRUNCH 10-12
- AUGUST 13 - PA MEETING @ 4:30

**SEPTEMBER**

- SEPTEMBER 9 - GRANDPARENTS' DAY 10:00 A.M.
- SEPTEMBER 17 - PA MEETING @ 4:30
- SEPTEMBER 24 - BLESSING OF THE PETS 9:00AM

**OCTOBER**

- OCTOBER 3 - OPEN HOUSE
- OCTOBER 8 - PA MEETING @ 4:30
- OCTOBER 9 - FIRE PREVENTION
- OCTOBER 31 - TRUNK OR TREAT 9:00 A.M.

**NOVEMBER**

- NOVEMBER 5 - PA MEETING @ 4:30
- NOVEMBER 21 - THANKSGIVING FEAST

**DECEMBER**

- DECEMBER 4 - SANTA'S WORKSHOP
- DECEMBER 10 - PA MEETING @ 4:30
- DECEMBER 19 - CHRISTMAS PAGEANT 6:30 PM

**JANUARY**

- JANUARY 14 - PA MEETING @ 4:30
- JANUARY 29 - SNOW DAY

**FEBRUARY**

- FEBRUARY 11 - PA MEETING @ 4:30

**MARCH**

- MARCH 4 - PA MEETING @ 4:30
- MARCH 5 - ASH WEDNESDAY SERVICE @ 9:00AM

**APRIL**

- APRIL 8 - PA MEETING @ 4:30
- APRIL 9 - WESTERN DAY

**MAY**

- MAY 5-9 - TEACHER APPRECIATION WEEK
- MAY 15 - SPRING MUSICAL SHOW 6:30 P.M.
- MAY 21 - PRE-K GRADUATION 10:00 AM
- MAY 22 - LAST DAY OF SCHOOL

**We follow the Conroe ISD school calendar.**