

APPLICATION FOR SCHOOL REGISTRATION

This application will be considered complete only when all required supporting data (noted on the reverse side) is attached.

STUDENT DATA

Name _____
 (Last) (First) (Middle)

Address _____

City _____ Zip _____

Phone _____ E-mail _____

Lives with: ___ Parents ___ Mother ___ Father ___ Legal Guardian

Birthdate _____ Male ___ Female ___

Religion _____

Church/Parish _____

Proposed Entry Grade _____

Proposed Entry Date _____

Public School Attendance Area _____

PARENTS/GUARDIAN DATA

Father _____
 (Last) (First)

Religion _____

Marital Status _____

Mother _____
 (Last) (First) (Middle)

Religion _____

Marital Status _____

Address of each, if different than student address.

Father _____
 Phone _____ E-mail _____

Mother _____
 Phone _____ E-mail _____

OCCUPATION:

Father _____
 Address _____
 Phone _____

Mother _____
 Address _____
 Phone _____

SCHOOL LAST ATTENDED

School _____

Address _____

City _____

State _____ Zip _____

Grade at time of withdrawal _____

Reason for transfer _____

DOES THIS STUDENT HAVE ANY SPECIAL EDUCATIONAL OR PHYSICAL NEEDS? YES ___ NO ___ (If "Yes" attach a complete description)

ALL SCHOOLS ATTENDED BY THIS STUDENT MUST BE LISTED ON THE REVERSE SIDE

SACRAMENTAL RECORD

	PARISH	CITY	DATE
BAPTISM	_____	_____	_____
EUCCHARIST	_____	_____	_____
RECONCILIATION	_____	_____	_____
CONFIRMATION	_____	_____	_____

Date of Application _____



OFFICE OF CATHOLIC SCHOOLS
OFFICIAL APPLICATION FORM

LIST ALL SCHOOLS PREVIOUSLY ATTENDED BY THIS STUDENT AND THE REASON FOR WITHDRAWAL.

SCHOOL	ADDRESS	DATE OF WITHDRAWAL	REASON FOR WITHDRAWAL

- All Application Materials Received:
- _____ Baptismal Record
 - _____ Birth Certificate
 - _____ Medical Immunization Record
 - _____ Records from all previous schools
 - _____ Custody Documentation**
 - _____ Immigration & Naturalization Service Information**
 - _____ Parishioner Certification*
 - _____ Registration Fee*
 - _____ Special Educational or Physical Needs Description**
- * If Locally Required
** If Applicable

By submitting this application I certify that all the above information is true and complete. I recognize and will meet my financial obligations to the school, tuition and fees, that are charged for the education of my child.

Parent _____ Signature _____

Date _____

FOR ADMINISTRATIVE USE ONLY
To be signed by the principal when all application materials are received.

Entry _____ Date _____

Principal's Signature _____

Date _____