



ADMISSIONS APPLICATION

Parish _____

Grade Entering _____
 Pre-K ONLY (Choose One)
 Half Day / Full Day

Child's Full Name _____
(LAST) (FIRST) (M.I.)

Mailing Address _____
(HOUSE NUMBER AND STREET ADDRESS)

_____ (CITY) (STATE) (ZIP CODE) (COUNTY)

Home Phone Number _____ Email _____

Date of Birth ____/____/____ Age _____ Gender _____

Ethnicity: AFRICAN AMERICAN ASIAN CAUCASIAN HISPANIC MULTI-RACIAL NATIVE AMERICAN PACIFIC ISLANDER

Religion: CATHOLIC NON-CATHOLIC Social Security Number ____-____-____

Student Resides with: MOTHER/FATHER MOTHER FATHER MOTHER/STEPFATHER FATHER/STEPMOTHER
 GRANDPARENTS OTHER

If divorced, who has custody of the child? _____

Mother's Name _____ Religion _____
(LAST) (FIRST) (M.I.)

Mother's Employer _____ Mother's Email _____

Mother's Work Phone ____-____-____ Cell Phone ____-____-____

Social Security # ____-____-____

Father's Name _____ Religion _____
(LAST) (FIRST) (M.I.)

Father's Employer _____ Father's Email _____

Father's Work Phone ____-____-____ Cell Phone ____-____-____

Social Security # ____-____-____

Step Parent's Name _____ Religion _____
(LAST) (FIRST) (M.I.)

Step Parent's Employer _____ Email _____

Step Parent's Work Phone ____-____-____ Cell Phone ____-____-____

Name of Previous School/Home Schooling _____

Student's Resident School District _____

County of Residence _____ Distance from School in Miles _____

Religious Sacraments:

Parish Name (Current) _____

	DATE	CHURCH	LOCATION
Baptism	_____	_____	_____
First Reconciliation	_____	_____	_____
First Communion	_____	_____	_____

Other Children in Family

Name	Age	Name	Age
1. _____	_____	2. _____	_____
3. _____	_____	4. _____	_____

Does child have any special learning needs? _____

Restrictions that should be on file with the school: _____

**UNLESS WE HAVE COURT RECORDS ON FILE THAT STATE OTHERWISE,
BOTH PARENTS HAVE ACCESS TO THE STUDENT AND THE CHILD'S EDUCATION RECORDS.**

Paternal Grandparents _____

Address _____

Maternal Grandparents _____

Address _____

VERY IMPORTANT:

- **Physical Exam** (performed within last 12 months) and a copy of up-to-date immunization record must be on file prior to the start of school.
- We must have a **Release Of Records** form signed and on file prior to the start of school.
- You must be enrolled in our **tuition management program (FACTS)** prior to the start of school.
- A **Parish Verification** form must be signed by pastor and on file in order to be eligible for our in-parish tuition rate.

Mother Signature: _____ Father Signature: _____