

Student Application



Please detach and return with birth certificate, baptismal certificate and fee

STUDENT INFORMATION

Student Name _____
Last First Middle Incoming Grade

Birth Date _____ Place of Birth _____ Gender _____

Pre-school only

☐

2 Day Program
(1/2 Day)

☐

3 Day Program
(1/2 Day)

☐

5 Day Program
(1/2 Day)

☐

Afterschool
Care

Please check all that apply

☐

2 Day Full
Day Program

☐

3 Day Full
Day Program

☐

5 Day Full
Day Program

Ethnicity: (Circle one) White Non-Hispanic Asian African-American Hispanic Bi-Racial American Indian

Languages spoken at home: _____ Other pertinent information: _____

Date of Baptism _____ Church _____ City _____ Religion _____
(if applicable)

Date of 1st Communion _____ Church _____ City _____
(if applicable)

Does child have any major physical disabilities? yes no If yes, please explain: _____

Has your child ever been tested or referred for early learning challenges? yes no If yes, please explain: _____

FAMILY INFORMATION

Father's Name _____ Place of Birth _____ Religion _____

Address _____ City _____ Zip Code _____

Father's Email Address: _____

Father's Home Phone: _____ Cell _____ Work # _____

Mother's Name _____ Place of Birth _____ Religion _____

Address _____ City _____ Zip Code _____

Mother's Email Address: _____

Mother's Home Phone: _____ Cell _____ Work # _____

Parents are: Married Divorced Widowed Single Remarried _____

Child lives with: Father Mother Both Other (specify): _____

Office use only:

Registration fee _____ Birth certificate _____ Baptismal certificate _____