

**\$20.00**

# HOBOKEN CATHOLIC ACADEMY

\* Parishioners from any catholic parishes are given preference for acceptance in the school and will need a **certification letter** from the pastor. To be considered a "parishioner" a family is expected to be officially registered, worship regularly, and support the parish by using envelopes or Parish Pay for at least six months.

Please send a copy of your child's **baptismal certificate**.

## Application form 2016-2017

<b>For School Office Use Only:</b>		<b>S C NC</b>	
Sibling in school: Name: _____	Grade: _____		
Parish Certification letter attached: _____	Baptismal Certificate attached: _____		#: _____
Date Received: _____	\$20.00 Application Fee: _____		Interview: _____

Please print

Date of Birth \_\_\_\_\_ Male: \_\_\_ Female: \_\_\_

Name of Student \_\_\_\_\_  
First Last

Grade entering \_\_\_\_\_ Religion of Applicant \_\_\_\_\_ Home phone#: \_\_\_\_\_

Full name of mother: \_\_\_\_\_

Mother's street address: \_\_\_\_\_

City and zip code: \_\_\_\_\_ Cell#: \_\_\_\_\_

Occupation: \_\_\_\_\_ Business Phone#: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Religion of Mother \_\_\_\_\_ Email: \_\_\_\_\_

Full name of father: \_\_\_\_\_

Father's street address: \_\_\_\_\_

City and zip code: \_\_\_\_\_ Cell#: \_\_\_\_\_

Occupation: \_\_\_\_\_ Business Phone#: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Religion of Father \_\_\_\_\_ Email: \_\_\_\_\_

If parents do not reside together, with whom does the applicant reside?

\_\_\_\_ Mother      \_\_\_\_ Father      \_\_\_\_ Other Legal Guardian

If "Other Legal Guardian", please provide name and address: \_\_\_\_\_

\_\_\_\_\_

**Continued on back**

Guardian's relationship to Applicant: \_\_\_\_\_

Who pays child's tuition: \_\_\_\_\_

How do you plan to pay child's tuition?

\_\_\_\_\_ Annual payment      \_\_\_\_\_ 4 Quarterly payments      \_\_\_\_\_ 10 Monthly payments

How do you describe your child? (Response is optional):

\_\_\_\_\_ African American      \_\_\_\_\_ Caucasian      \_\_\_\_\_ Native American  
\_\_\_\_\_ Asian American      \_\_\_\_\_ Hispanic      \_\_\_\_\_ Other

Previous school attended by Applicant:

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

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

Has the applicant been tested by a school psychologist or child study team, or by an independent educational consultant? \_\_\_\_\_ yes      \_\_\_\_\_ no

If yes, please describe the nature of the testing: \_\_\_\_\_

Does the applicant have:      \_\_\_\_\_ IEP      \_\_\_\_\_ ISP      \_\_\_\_\_ IIP

Why do you want your child to attend Hoboken Catholic Academy? \_\_\_\_\_

Do you plan to have your child attend HCA through Grade 8? \_\_\_\_\_ Yes      \_\_\_\_\_ No

**For Catholics:**

Which sacraments has the applicant received?

Baptism: \_\_\_\_\_ yes      \_\_\_\_\_ no      Date: \_\_\_\_\_      Church: \_\_\_\_\_  
City: \_\_\_\_\_      State: \_\_\_\_\_

First : \_\_\_\_\_ yes      \_\_\_\_\_ no      Date: \_\_\_\_\_      Church: \_\_\_\_\_  
Penance      City: \_\_\_\_\_      State: \_\_\_\_\_

First : \_\_\_\_\_ yes      \_\_\_\_\_ no      Date: \_\_\_\_\_      Church: \_\_\_\_\_  
Communion      City: \_\_\_\_\_      State: \_\_\_\_\_

Confirmation:

\_\_\_\_\_ yes      \_\_\_\_\_ no      Date: \_\_\_\_\_      Church: \_\_\_\_\_  
City: \_\_\_\_\_      State: \_\_\_\_\_