APPLICATION FOR ADMISSION---NEW STUDENT 2012-2013

Please return this Application Packet with a non-refundable fee of <$50.00, which is applied to the student's tuition.>
Checks and money orders should be made payable to <your school name (this sentence is optional)>.

As **<your school name>** is a private, non-public institution, the administration reserves the right to terminate the enrollment of a student for any reason and at any time. Any disciplinary policies and procedures are simply guidelines that the school generally follows. These guidelines do not impede this right by administration to terminate the enrollment of a student for any reason at any time. False information on this and any of the application documents may cause a forfeit of admission consideration or enrollment if discovered after the student is accepted for enrollment. The above statement and this application for admission are inclusive of all application documents.

STUDENT DATA: *Please Print*　　　　　　　　　　**PLEASE LIST STUDENT GRADE IN SEPTEMBER 2012:** _____

Student's Last Name:	**First:**	**Middle:**
Address:		**Male / Female (circle one)**
City:　　　　　　　　　**State:**	**Zip:**	**Phone:**
Date of Birth:	**Birth Certificate No:**	**Age as of 9/1/12:**
Birth City / State:	**Public School District:** (where you live)	
Religion:	**If Catholic, parish where registered:** **Location of Parish:**	

Ethnicity (check one): ☐ **Black or African American** ☐ **Hispanic** ☐ **Asian** ☐ **Native American** ☐ **White** ☐ **Multi-racial** ☐ **Pacific Island**

School Last Attended / Date Last Attended:	**Address of School Last Attended:**

FAMILY DATA: *Please Print*

MOTHER (First & Last)	FATHER (First & Last)
Name:	**Name:**
Address:	**Address:**
Home Phone:	**Home Phone:**
Cell Phone:	**Cell Phone:**
Emergency Phone:	**Emergency Phone:**
E-mail:	**E-mail:**
Occupation:	**Occupation:**
Employer:	**Employer:**
Business Phone:	**Business Phone:**
Religion:	**Religion:**
Parish where registered:	**Parish where registered:**

Student resides with:　　☐ **Both Parents**　　☐ **Mother only**　　　☐ **Father only**　　☐ **Guardian**

CHECK ALL THOSE THAT APPLY

☐ Parents Married　　☐ Parents Separated　　☐ Parents Divorced　　☐ Father Remarried　　☐ Father Deceased
☐ Parents not married　　☐ Single Parent Family　　☐ Mother Remarried　　☐ Mother Deceased

GUARDIANSHIP (if applicable)

Custody: *A legal document stating guardianship must be provided in cases of divorce, adoption, physical/shared custody.*
Student's legal guardian (if other than parent) : _____ Relationship to the student: _____
OTHER IMPORTANT NOTES CONCERNING YOUR CHILD: _____

TUITION STATEMENTS SHOULD BE SENT TO: ____ Mother ____ Father

Or Other: Name: _____ Relationship to the student: _____

Address: _____

_____

SACRAMENTAL INFORMATION:

<u>DATE</u>	<u>CHURCH</u>	<u>ADDRESS</u>
_____	_____	_____
Baptism		
_____	_____	_____
Reconciliation		
_____	_____	_____
First Holy Communion		
_____	_____	_____
Confirmation		

BROTHERS / SISTERS IN ORDER OF BIRTH:

NAME (First & Last)	**DATE OF BIRTH**
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

Please note any medical or dietary information necessary for management in an emergency situation, e.g. allergies, medication, special conditions:

*A copy of the child's <u>immunization card</u> must be presented with this application if the student is new to the school.

Statement of Nondiscriminatory Acceptance Policy - <your school here> will not discriminate on the basis of race, gender, or national origin. Students seeking acceptance and enrollment to the school will be considered based on religion, academic performance and learning needs, attendance, character, morality and conduct consistent with Catholic doctrine, and applicable payment history within a Catholic or private/nonpublic school. The school maintains the right to give preferential acceptance and enrollment to Catholic students. The student is not permitted to attend this school if she or he has an outstanding payment balance at another Catholic school within the Diocese of Greensburg. Your signature below indicates that you understand and accept the content and provisions of this application.

Parent/Guardian Signature: _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

OFFICE USE ONLY:

Date Received:_____

- $ <insert amount> Non-refundable family fee enclosed   Date Paid_____

Letter of Acceptance: _____   **Information Packet sent:** _____

Records Requested: _____   **Transportation Notified:** _____