GOODNESS • EXCELLENCE • SERVICE



APPLICATION FOR NEW ADMISSION SCHOOL YEAR: 2019-2020

To apply for admission of a student, the parent or guardian must complete this form and return it to the school. \underline{A} non-refundable \$75 application fee is required.

Applicant's Las	t Name	First Name	Mido	lle Initial	Preferred First Nan	ne 🗆 Male		
						□ Female		
Street Address					Home Phone Numl	per		
City State		Zip Code			Child's Birthplace	Child's Birthplace		
Date of Birth Grade for Which Applying				Present Grade	Present Grade			
Present School's Name and Address					Phone Number	Phone Number		
Present School's Name and Address					riione ivumber			
Child lives with: Both Parents								
Parents are:	☐ Married	☐ Separated	□ Divorced	□Single	e/Unmarried	eased Mother		
						Father		
Complete Name	e of Mother	Occupation	Primary Phone	Ema	ail	Religion		
Compiete i vanie			111111111111111111111111111111111111111		•••			
Complete Name of Father		Occupation	Primary Phone Email		ail	Religion		
Legal Guardian, if other than parent:								
Primary language spoken at home:								
Timary language spoken at nome.								
PARISH INFORMATION								
If Catholic, please indicate parish where registered Parish contribution envelope number:								
How often do you attend mass:						Do Not Attend		
SACRAMENTAL INFORMATION								
Baptized	If yes, please provide baptism information: Date:							
	Yes No Church: City and State:							
_ 110								
Reconciliation	Reconciliation If yes, please provide reconciliation information: Date:							
☐ Yes	Yes							
□ No	Church: City and State:							

First	If yes, please provide first communion information:	Date:				
Communion						
☐ Yes	Church:	City and State:				
\square No						
Please briefly indicate why you are considering enrollment at St. Christopher Parish School.						
Signature of Mo	ther Signature of Father	Date of Application				

Please note: TK applicants must be 4 years old by September 1 and Kindergarten applicants must be 5 years old by September 1

Thank you for your interest in St. Christopher Parish School!

FOR SCHOOL USE ONLY							
Date Received:	Received By:	Application Fee:	Check No./Receipt No.				