



# St. Joseph School

## Application Form

(Please Print)

Office Use Only	
Date Rec'd	_____
Check #	_____
Amount	_____
Reg. Cont. <input type="checkbox"/>	TFA <input type="checkbox"/>
Acceptance _____	
Notification Sent _____	
PS <input type="checkbox"/>	FACTS <input type="checkbox"/>
TLC <input type="checkbox"/>	QB <input type="checkbox"/>
Birth <input type="checkbox"/>	Bap <input type="checkbox"/>

Child/Children's Last Name \_\_\_\_\_

	1ST STUDENT	2ND STUDENT	3RD STUDENT
Name of Child Applying (First and Middle)			
M/F			
Birth Date			
Grade Entering			

\_\_\_\_\_  
**Mother's** Name (Last)                      (First)                      Religion

\_\_\_\_\_  
 Address    City/State                      Zip                      Home Phone

\_\_\_\_\_  
 Occupation                      Employer                      Work Phone                      Cell Phone/Pager

\_\_\_\_\_  
**Father's** Name (Last)                      (First)                      Religion

\_\_\_\_\_  
 Address (if different)                      City/State                      Zip                      Home Phone

\_\_\_\_\_  
 Occupation                      Employer                      Work Phone                      Cell Phone/Pager

**PARENT/GUARDIAN STATUS:**    Married             Single             Divorced             Separated             Widowed

**Applicant resides with** (both parents, father, mother) \_\_\_\_\_

Preferred Contact for all communications regarding this application: \_\_\_\_\_

Please check any of the following criteria which best describe your family:

\_\_\_\_\_ **Active Catholic** parishioners. Current Parish: \_\_\_\_\_

\_\_\_\_\_ voluntary service to Parish \_\_\_\_\_

\_\_\_\_\_ celebrate liturgy regularly

\_\_\_\_\_ **Active Non-Catholic.** Current place of worship: \_\_\_\_\_

\_\_\_\_\_ voluntary service to church \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent E-Mail Addresses: \_\_\_\_\_

## NEW STUDENT INFORMATION

1ST STUDENT

2ND STUDENT

3RD STUDENT

<b>Names of Student Applying (First and Middle )</b>			
<b>Birth City/State</b>			
<b>Religion</b>			
<b>Ethnicity</b> Hispanic/Latino, Asian, American Indian/Native Alaskan, African American/ Black, Native Hawaiian/Other Pacific Islander, Caucasian or Multi-racial			
<b>Date of Baptism</b>			
<b>Church of Baptism City/State</b>			
<b>Date of 1st Communion</b>			
<b>Church of 1st Communion City/State</b>			
<b>Full Name &amp; Address of LAST School Attended (Include Zip Code &amp; Phone Number.)</b>			
<b>Schools Previously Attended (Include dates attended; attach additional paper if needed.)</b>			

**Please list others living in your household:**

Siblings:

Name \_\_\_\_\_ Birth date \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Birth date \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_ Birth date \_\_\_\_\_ School \_\_\_\_\_

Others (not parents):

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

St. Joseph School admits students of any race, color or national and ethnic origin to all the rights privileges, programs, and activities generally accorded or made available to all students at the school. In the administration of its policies, the school does not discriminate on the basis of race, color, national or ethnic origin in the administration of its educational policies, admission policies, scholarship and loan and athletic and other administered programs.