

Family Name: _____ Student ID: _____ Grade: _____ Room: _____

Student Information

First Name	Middle Name	Last Name	Prefers to be called
Gender	BirthDate	Birth Place: City, State, Country	Child Lives With
Social Security Number	Home Phone	Mother's Cell Phone	Father's Cell Phone
Parent Primary Email Address	Street Address	City	State Zip
Does/has the student have an IHP? <input type="radio"/> Yes <input type="radio"/> No If yes, please attach information to this application.			
Allergies <input type="radio"/> Yes <input type="radio"/> No		Illness Disability <input type="radio"/> Yes <input type="radio"/> No	
Does/has student received Special Education Services?		Student Ethnic Racial Background:	
<input type="checkbox"/> Reading <input type="checkbox"/> Math <input type="checkbox"/> Speech <input type="checkbox"/> Other _____		<input type="checkbox"/> American Indian <input type="checkbox"/> Hawaiian or Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Black or African American <input type="checkbox"/> Two or more races <input type="checkbox"/> Caucasian-white	
Does/has student received Learning Support Services?		Languages spoken at home: _____	
<input type="radio"/> Yes <input type="radio"/> No If yes, list subjects: _____			
Does/has student have an IEP? <input type="radio"/> Yes <input type="radio"/> No			
If yes, please attach information to this application.			

Student Sacramental Record

Student's Religion	Church or Place of Worship	Location
Baptismal Date	Church or Place of Worship	Location
Reconciliation Date	Church or Place of Worship	Location
First Communion Date	Church or Place of Worship	Location

Other Information

<h4>Academic Information</h4> <p>School Transferring From _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <h4>Sibling information</h4> <table style="width:100%;"> <tr> <td style="width:33%;">Sibling Name</td> <td style="width:33%;">Current School</td> <td style="width:33%;">Gr.</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Sibling Name</td> <td>Current School</td> <td>Gr.</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Sibling Name</td> <td>Current School</td> <td>Gr.</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>	Sibling Name	Current School	Gr.	_____	_____	_____	Sibling Name	Current School	Gr.	_____	_____	_____	Sibling Name	Current School	Gr.	_____	_____	_____	<h4>School Year 2021-2022</h4> <p>Grade Applying for: _____</p> <p>Registration Date: _____</p> <p>Record Requested: _____</p> <p>For each student application, please provide:</p> <ul style="list-style-type: none"> • Legal Birth Certificate • Immunization Record • Social Security Card • Baptismal Certificate • First Communion Certificate • Current & past year's report card • Standardized test scores • Provide description of any special learning or physical disability • IEP, if applicable • Application Fee (\$50) <p>Prekindergarten also needs:</p> <ul style="list-style-type: none"> • Health Statement • Notification of NRS. 178
Sibling Name	Current School	Gr.																	
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