



APPLICATION FOR ADMISSION

Current School _____

Applying for School Year: _____

APPLICANT(S) INFORMATION

Student Number 1 Information: Applying for Grade: _____

Applicant's Full Name: _____

Last *First* *Middle* *Preferred Name*

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____

Social Security Number: _____ Date of Birth: _____

Sex: _____ Race / Ethnicity: _____ Religion (Parish, if Catholic): _____

Student lives with: Parents Father Mother Grandparent Other: _____
Please circle one of the above.

**If any guardianship or custody papers exist, a certified copy is required for the School's file.*

Student Number 2 Information: Applying for Grade: _____

Applicant's Full Name: _____

Social Security Number: _____ Date of Birth: _____

Sex: _____ Race / Ethnicity: _____ Religion (Parish, if Catholic): _____

Student lives with: Parents Father Mother Grandparent Other: _____

**If any guardianship or custody papers exist, a certified copy is required for the School's file.*

Student Number 3 Information: Applying for Grade: _____

Applicant's Full Name: _____

Social Security Number: _____ Date of Birth: _____

Sex: _____ Race / Ethnicity: _____ Religion (Parish, if Catholic): _____

Student lives with: Parents Father Mother Grandparent Other: _____

**If any guardianship or custody papers exist, a certified copy is required for the School's file.*

ADDITIONAL INFORMATION

Are any family members alumni and if so, the school and the years attended? _____

FAMILY INFORMATION

Father's Full Name: _____

Home Address (if different from student): _____

City: _____ State: _____ Zip Code: _____

Father's Work Phone: _____ Father's Mobile Phone: _____

Home Phone : _____ Father's Email: _____

Father's Employer: _____

Father's Religion (For Catholics, List Parish): _____

Marital Status: Married Divorced Single Separated Widowed Remarried

If applicable, Stepmother's Name: _____ Phone: _____ Email: _____

Mother's Full Name: _____

Home Address (if different from student): _____

City: _____ State: _____ Zip Code: _____

Mother's Work Phone: _____ Mother's Mobile Phone: _____

Home Phone : _____ Mother's Email: _____

Mother's Employer: _____

Mother's Religion (For Catholics, List Parish): _____

Marital Status: Married Divorced Single Separated Widowed Remarried

Please circle one of the above.

If applicable, Stepfather's Name: _____ Phone: _____ Email: _____

How did you hear about St. Patrick Catholic High School? _____

Please list below any other pertinent information regarding the applicant:

The information contained in this application is complete and accurate to the best of my knowledge. I will notify St. Patrick Catholic High School of any changes before and after enrollment.

Signature of Parent / Guardian

Date