

APPLICATION FOR SCHOOL REGISTRATION

This application will be considered complete only when all required supporting data (noted on the reverse side) is attached.

STUDENT DATA

Name _____
(Last) (First) (Middle)
Address _____
City _____ Zip _____
Phone _____ E-mail _____
Lives with: ___ Parents ___ Mother ___ Father ___ Legal Guardian
Birthdate _____ Male _____ Female _____
Religion _____
Church/Parish _____
Proposed Entry Grade _____
Proposed Entry Date _____
Public School Attendance Area _____

PARENTS/GUARDIAN DATA

Father _____
(Last) (First)
Religion _____
Marital Status _____
Mother _____
(Last) (First) (Middle)
Religion _____
Marital Status _____
Address of each, if different than student address.
Father _____
Phone _____ E-mail _____
Mother _____
Phone _____ E-mail _____
OCCUPATION:
Father _____
Address _____
Phone _____
Mother _____
Address _____
Phone _____

SCHOOL LAST ATTENDED

School _____
Address _____
City _____
State _____ Zip _____
Grade at time of withdrawal _____
Reason for transfer _____

DOES THIS STUDENT HAVE ANY SPECIAL EDUCATIONAL OR PHYSICAL NEEDS? YES _____ NO _____ (If "Yes" attach a complete description)

ALL SCHOOLS ATTENDED BY THIS STUDENT MUST BE LISTED ON THE REVERSE SIDE

SACRAMENTAL RECORD

	PARISH	CITY	DATE
BAPTISM	_____	_____	_____
EUCCHARIST	_____	_____	_____
RECONCILIATION	_____	_____	_____
CONFIRMATION	_____	_____	_____

Date of Application _____

**DIOCESE OF YOUNGSTOWN
OFFICE OF CATHOLIC SCHOOLS

OFFICIAL APPLICATION FORM**

**LIST ALL SCHOOLS PREVIOUSLY ATTENDED BY THIS STUDENT AND THE
REASON FOR WITHDRAWAL.**

SCHOOL	ADDRESS	DATE OF WITHDRAWAL	REASON FOR WITHDRAWAL

- All Application Materials Received:
- _____ Baptismal Record
 - _____ Birth Certificate
 - _____ Medical Immunization Record
 - _____ Records from all previous schools
 - _____ Custody Documentation**
 - _____ Immigration & Naturalization Service Information**
 - _____ Parishioner Certification*
 - _____ Registration Fee*
 - _____ Special Educational or Physical Needs Description
- * If Locally Required
** If Applicable

By submitting this application I certify that all the above information is true and complete. I recognize and will meet my financial obligations to the school, tuition and fees, that are charged for the education of my child.

Parent Signature _____

Date _____

FOR ADMINISTRATIVE USE ONLY

To be signed by the principal when all application materials are received.

Entry Date _____

Principal's Signature _____

Date _____