

ST. STEPHEN SCHOOL ENROLLMENT APPLICATION

DATE _____

GRADE APPLYING TO _____

CHILD'S NAME	SEX	DATE OF BIRTH	PLACE OF BIRTH
Last _____ First _____ Middle _____	M <input type="checkbox"/> F <input type="checkbox"/>	Month _____ Day _____ Year _____	City _____ State _____

ADDRESS	HOME PHONE
No. and Street _____ City _____ State _____ Zip _____	_____

WHO IS THE CHILD LIVING WITH?

Natural father and mother

Other _____

FATHER (or male guardian)	U. S. Citizen	Religion	Place of Birth
Last _____ First _____ Middle _____			

Name of Employer, Business Address, City & Zip	Occupation
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Father's Email	Business Phone	Cell Phone
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MOTHER (or female guardian)	U. S. Citizen	Religion	Place of Birth
Last _____ First _____ Middle _____			

Name of Employer, Business Address, City & Zip	Occupation
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Mother's Email	Business Phone	Cell Phone
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PLEASE LIST THE NAMES AND RELATIONSHIPS OF OTHER ADULTS AND CHILDREN LIVING WITH THE CHILD

PLEASE CHECK ANY SACRAMENT(S) THE CHILD HAS RECEIVED

Catholic Non-Catholic

Baptism Date _____ Church _____ Address _____

Communion Date _____ Church _____ Address _____

Reconciliation Date _____ Church _____ Address _____

Confirmation Date _____ Church _____ Address _____

SCHOOL THE CHILD LAST ATTENDED (OR IS NOW ATTENDING)

NAME OF SCHOOL _____ NAME OF PRINCIPAL _____

ADDRESS OF SCHOOL _____

WHAT GRADE IS YOUR CHILD CURRENTLY IN? _____

A COPY OF MOST RECENT REPORT CARD MUST BE RECEIVED WITH APPLICATION

PLEASE LIST ALL OTHER SCHOOLS THE CHILD HAS ATTENDED AND THE GRADES FOR EACH

DO YOU HAVE ANY CHILDREN ALREADY ATTENDING ST. STEPHEN SCHOOL? IF YES, PLEASE LIST THEIR NAMES AND CURRENT GRADES

WHETHER YOU ARE CATHOLIC OR NOT, WE NEED TO KNOW WHICH CATHOLIC CHURCH YOU LIVE CLOSEST TO (WHICH PARISH ARE YOU IN?)

IF YOU ARE CATHOLIC, ARE YOU REGISTERED IN A PARISH? IF YES, WHICH ONE? IF ST. STEPHEN CHURCH PLEASE INDICATE YOUR ENVELOPE NUMBER

_____ Envelope Number: _____

IF YOUR CHILD IS CATHOLIC AND NOT ATTENDING CATHOLIC SCHOOL, WHERE DOES HE/SHE ATTEND CCD CLASSES?

DID SOMEONE REFER YOU TO ST. STEPHEN SCHOOL?

THE ARCHDIOCESE BOARD OF EDUCATION REQUIRES US TO ASK YOU THE RACE OF THIS CHILD

Please check one box:

- Native American African American Multi-Racial/Non-White Chinese Indo-Chinese
- Japanese Korean Other Asian Filipino White Nat
- Hawa/Pac Island/Samoan Latino

Please also check whether this child is: Hispanic or Non-Hispanic

PLEASE LIST BRIEFLY THE REASONS WHY YOU ARE APPLYING TO ST. STEPHEN SCHOOL

FOR OFFICE USE ONLY: APPLIC. CK #: _____ AMOUNT: _____ DATE: _____

VERIFICATION DOB: _____ BAPTISMAL CERT. _____ BIRTH CERT. _____

REG. CK #: _____ AMOUNT: _____ DATE: _____

COPY OF REPORT CARD _____