



# Application for Admission 2012-13 School Year

GRADE LEVEL APPLYING FOR: \_\_\_\_\_ Re-Applicant?  YES  NO

**Applications will not be accepted unless copies of the following are attached:**

Birth Certificate \_\_\_\_\_ Baptism Certificate \_\_\_\_\_ Immunization Record \_\_\_\_\_ Application Fee (\$25) \_\_\_\_\_  
Social Security Card \_\_\_\_\_ School Records (for students entering grades 1-8) - current and last year's records \_\_\_\_\_  
IEP or Evaluation (If Applicable) \_\_\_\_\_

## Applicant Information

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_ Goes By \_\_\_\_\_

Current Address \_\_\_\_\_ City & State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ SSN: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_ Gender:  Male  Female \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Birthdate: month/day/year

Child No. \_\_\_\_\_ of \_\_\_\_\_ children Is a sibling currently enrolled at St. Jude School?  Yes  No

Please list any sibling(s) and grade(s) enrolled at St. Jude for current school year.

Religious Affiliation \_\_\_\_\_ New U.S. Dept. of Education Race and Ethnicity Reporting Requirements  
Ethnicity (Choose One):  Hispanic/Latino  Non-Hispanic/Latino

If Non-Hispanic/Latino, choose one or more below:  
 American Indian or Alaska Native  Asian  Black or African American  
 Native Hawaiian or Other Pacific Islander  White

Registered Church Parish \_\_\_\_\_ Identified Stewardship Giver:  Yes  No

Geographical Church Parish (in which child lives) \_\_\_\_\_ Subdivision (in which child lives) \_\_\_\_\_

Parent(s) are:  Married  Single  Divorced  Separated  Widowed  Remarried

Student resides with: \_\_\_\_\_

Sacraments Received: (Please include copies of certificates for all sacraments received by applicant.)  
Church \_\_\_\_\_ City, State \_\_\_\_\_ Date \_\_\_\_\_

Baptism \_\_\_\_\_

Reconciliation \_\_\_\_\_

First Communion \_\_\_\_\_

Child lives with \_\_\_\_\_

Full legal name of person(s) responsible for tuition payment \_\_\_\_\_

Current Address \_\_\_\_\_ City & State \_\_\_\_\_ Zip Code \_\_\_\_\_

Have any siblings graduated from St. Jude School? If so, please list name(s) and year(s) graduated: \_\_\_\_\_

Are you [applicant's parent(s)] a St. Jude School alum? If so, please list year graduated: \_\_\_\_\_

## Family/Contact Information

Father's First Name	Middle Initial	Last Name	Goes By
Father's Current Address		City & State	Zip Code
Father's Home Phone Number	Identified Stewardship Giver: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Father's Cell Phone Number	Father's Registered Church Parish		
Father's Occupation	Father's Email Address		
Father's Business Phone Number	Father's Employer		
Father's Business Phone Number		Father's Religious Affiliation	

Mother's First Name	Middle Initial	Last Name	Goes By
Mother's Current Address		City & State	Zip Code
Mother's Home Phone Number	Identified Stewardship Giver: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mother's Cell Phone Number	Mother's Registered Church Parish		
Mother's Occupation	Mother's Email Address		
Mother's Business Phone Number	Mother's Employer		
Mother's Business Phone Number		Mother's Religious Affiliation	

Check if Applicable:

<input type="checkbox"/> Father Deceased	<input type="checkbox"/> Mother Deceased	<input type="checkbox"/> Parents Separated
<input type="checkbox"/> Parents Divorced	<input type="checkbox"/> Mother Remarried	<input type="checkbox"/> Father Remarried
<input type="checkbox"/> Father has legal custody	<input type="checkbox"/> Mother has legal custody	<input type="checkbox"/> Joint custody

Please list below any brothers and/or sisters under the age of 19 (attach additional list if needed):

Name	Date of Birth	School Attending (2010-2011)	Current Grade
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

## Previous Educational Information

Please list any schools, with addresses, in which the applicant previously attended (including pre-school). Attach an additional list if needed.

Full Name of School	Address	Grade Level(s) Attended
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Has applicant been enrolled or has received services for any of the following:

- Special education class  No  Yes  
Remedial Tutoring  No  Yes  
Gifted or Talented Program or Testing  No  Yes  
Psycho-Educational Evaluation or Testing  No  Yes  
Learning difference or condition requiring medical, educational, emotional, or behavioral accommodations  No  Yes  
Has your child been retained for any grade level?  No  Yes

Please explain if yes to any of the above. Note location and date. Copies of evaluation and/or IEP are required:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the applicant been dismissed and/or asked to leave any school?  No  Yes

Has the applicant received either an "in-school" suspension or an "at-home" suspension from any classes at school?

If "yes" to either of these, please explain \_\_\_\_\_

## Participation in Parish Life

As a Catholic parent/guardian, I participate in the stewardship of prayer in my parish by attending Mass:  Yes ( Weekly  Monthly  Seldom)  No

As a Catholic parent/guardian, I am an ISG as determined by use of church envelope in Sunday collection  No  Yes

As a Catholic parent/guardian, I participate in the ministry of my church parish in the following ways (i.e. lector, Eucharistic minister, religion teacher, Altar Society, parish fair core committee, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If your child is currently in public school, has he or she attended the Parish School of Religion?  Yes  No Which Parish? \_\_\_\_\_

Please briefly explain why you want your child to attend St. Jude School (Attach additional paper or use back if needed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I verify that the above information is factual and complete. I understand that failure to disclose previous misconduct or educational records is cause for withdrawal. If student is accepted, I agree to abide by the published tuition and fee schedule. Failure to follow the payment schedule may result in another student being accepted in his/her place. I permit St. Jude School to seek records from any prior educational institution the applicant attended and to release records on the applicant's behalf as requested by any future educational institution.**

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

Date: \_\_\_\_\_