

**APPLICATION FOR SAINT MARY SCHOOL**

Date of Application: \_\_\_\_\_

Applying for Grade \_\_\_\_\_

**PLEASE PRINT**

**Child's Name:** \_\_\_\_\_ **Sex** \_\_\_\_\_ **Race** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Name of Hospital \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Current Address:** \_\_\_\_\_ **Home Phone #:** \_\_\_\_\_

**Street** \_\_\_\_\_ **Apt. #** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

Name of School Now Attending: \_\_\_\_\_ Address: \_\_\_\_\_

Parish/Church Regularly Attended: \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church: \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Date of First Communion: \_\_\_\_\_ Church: \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Date of Penance: \_\_\_\_\_ Church: \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

# of children in family: \_\_\_\_\_ Any other children currently in St. Mary's School? yes/no List grades: \_\_\_\_\_

Any other children applying at this time? yes/no List grades: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Occupation: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Occupation: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work # \_\_\_\_\_

**Guardian :** \_\_\_\_\_ Home #: \_\_\_\_\_ Cell# \_\_\_\_\_

**(only if other than parent) ( ) Mother Deceased ( ) Father Deceased**

**Please check child's age according to requirements:**

**Kindergarten: 5 years old by October 1<sup>st</sup>**

**Grade 1: 6 years old by October 1<sup>st</sup>**

**\*\*\*IN NO WAY DOES THIS APPLICATION ENSURE PLACEMENT IN SAINT MARY SCHOOL. \*\*\***