

Today's Date _____

St. Pancratius Parish School

Family # _____

Receiving employee initials _____

Application for Enrollment 2010-2011

Grade for September 2010 _____

Student Information

Please Print

Last Name		First Name		Middle Name		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		United States Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, please identify country of citizenship.	
Street Address			City		Zip	Date of Birth		City of Birth		State of Birth	Country of Birth
Home Phone with Area Code			Baptism Date		Church			City		State	
Social Security Number			First Communion Date		Church			City		State	
School Last Attended			Address		City		State	Zip	School Phone with Area Code		
Religion		Has the student ever skipped or repeated a grade? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, which grade and why?						
What language did the student learn when he/she first learned to talk?			What language does the student use most frequently at home?			What language do the parents/guardians use to speak to the student most frequently?			What language is spoken most often by the adults in the home?		

Parent/Guardian Information

Student lives with:

- Both Parents (biological)
 Single Parent
 Grandparent(s)
 Guardian(s)
 Blended Family
 Mother Remarried
 Father Remarried
 Mother Deceased
 Father Deceased
 Other

<input type="checkbox"/> Biological Father <input type="checkbox"/> Stepfather <input type="checkbox"/> Guardian			<input type="checkbox"/> Biological Mother <input type="checkbox"/> Stepmother <input type="checkbox"/> Guardian					
Last Name (if different from above)		First Name	Last Name (if different from above)		First Name			
Address (if different from above)		City	Zip	Address (if different from above)		City	Zip	
Home Phone (if different from above)	Work Phone		Cell Phone		Home Phone (if different from above)	Work Phone		Cell Phone
Occupation	Employer		Religion		Occupation	Employer		Religion
Place of Birth	St. Pancratius Alumni <input type="checkbox"/> Yes <input type="checkbox"/> No		Year Graduated		Place of Birth	St. Pancratius Alumni <input type="checkbox"/> Yes <input type="checkbox"/> No		Year Graduated

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All Siblings

#	Name	Date of Birth	Gender	Attends St. Pancratius
1.			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes Current Grade _____ <input type="checkbox"/> No
2.			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes Current Grade _____ <input type="checkbox"/> No
3.			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes Current Grade _____ <input type="checkbox"/> No
4.			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes Current Grade _____ <input type="checkbox"/> No

Family Email address (most often checked) _____

May we send periodic e-mails to this address? Yes No

How did you become interested in St. Pancratius School? (Please check all that apply)

Family Newspaper Website Church Alumni Staff Other

For Office Use Only

Testing Fee Received	Paid with	Amount	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Cash <input type="checkbox"/> Check #	\$	
Parish # _____	<input type="checkbox"/> Oldest/Only	<input type="checkbox"/> New This Year	
<input type="checkbox"/> Copy of Birth Certificate	Accepted Date	Letter Sent Date	Data Entry Date
<input type="checkbox"/> Copy of Baptism Certificate			
<input type="checkbox"/> Immunization Record			
<input type="checkbox"/> Copy of First Holy Communion Certificate			
<input type="checkbox"/> Report Card			
<input type="checkbox"/> Previous School Records			
<input type="checkbox"/> Standardized Test Scores			