

Application for Admission

This application must be accompanied by a copy of the following: state birth certificate, copy of baptismal card, and immunization record. Applications without the required documents are considered incomplete.

Applicant Information

Application for grade: _____ School year: _____
Applicant's last name: _____ First: _____ Middle: _____
Current address: _____ City: _____ State: _____ Zip: _____
Home phone: _____ Family e-mail address: _____
Date of birth: _____ Male Female Social Security number: _____
Religion: _____ If Catholic, please list parish: _____
African American Caucasian Asian Hispanic American Indian Pacific Islander Multi-racial
Date of baptism: _____ Parish: _____
Date of reconciliation: _____ Parish: _____
Date of first communion: _____ Parish: _____

Guardianship Information

Full name of father (or guardian): _____
Title Last First Middle initial
Married Single Separated Divorced Remarried Deceased
Street address and phone number (if different from applicant): _____
Employer: _____ Work phone: _____ E-mail: _____
Full name of mother (or guardian): _____
Title Last First Middle initial
Married Single Separated Divorced Remarried Deceased
Street address and phone number (if different from applicant): _____
Employer: _____ Work phone: _____ E-mail: _____