



ST. PATRICK CATHOLIC SCHOOL APPLICATION



Accredited by Middle States Association
Commissions on
Elementary and Secondary Schools

APPLYING FOR GRADE (please circle) PREK KN 1 2 3 4 5 6 SIBLINGS APPLYING FOR GRADE _____

SCHOOL YEAR: _____

FOR PREK: _____ HALF DAY _____ FULL DAY
_____ 3 DAYS _____ 5 DAYS

CHILD'S NAME: _____

ADDRESS: _____ ZIP: _____

TELEPHONE: _____ SCHOOL DISTRICT: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____ CITIZEN: _____

SEX: _____ RACE: _____ SOCIAL SECURITY NUMBER: _____

NON-CATHOLIC _____ CATHOLIC _____ REGISTERED MEMBER OF _____ PARISH

FATHER'S FULL NAME: _____

FATHER'S PLACE OF EMPLOYMENT: _____ OCCUPATION: _____

WORK PHONE NUMBER: _____ CELL: _____ E-MAIL: _____

FATHER'S PLACE OF BIRTH: _____ RELIGION: _____

EDUCATION: (PLEASE CIRCLE) ELEMENTARY SECONDARY COLLEGE ADVANCED

MOTHER'S FULL NAME: _____

MOTHER'S MAIDEN NAME: _____

MOTHER'S PLACE OF EMPLOYMENT: _____ OCCUPATION: _____

WORK PHONE NUMBER: _____ CELL: _____ E-MAIL: _____

MOTHER'S PLACE OF BIRTH: _____ RELIGION: _____

EDUCATION: (PLEASE CIRCLE) ELEMENTARY SECONDARY COLLEGE ADVANCED

BROTHERS: (Names & ages) _____

SISTERS: (Names & ages) _____

PLEASE CIRCLE PHRASES THAT DESCRIBES YOUR PRESENT FAMILY SITUATION:

MARRIED SEPARATED DIVORCED SINGLE PARENT FATHER REMARRIED MOTHER REMARRIED

CHILD LIVES WITH FATHER _____ MOTHER _____ STEPFATHER _____ STEPMOTHER _____

IF THERE IS A STEPFATHER OR STEPMOTHER PLEASE LIST THEIR NAME BELOW:

IF NONE OF THE ABOVE, PLEASE GIVE FULL NAME AND RELATIONSHIP OF
CHILD'S GUARDIAN _____

PARENTAL RIGHTS (in cases of separation or divorce) _____

(School to be supplied with a copy of court order.)

PLEASE COMPLETE REVERSE SIDE ALSO.

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LANGUAGE SPOKEN AT HOME (if not English) _____

LAST SCHOOL CHILD ATTENDED: _____

ADDRESS OF ABOVE SCHOOL: _____

ZIP: _____

SACRAMENTS RECEIVED:

CHURCH

CITY & STATE

DATE

BAPTISM: _____

FIRST PENANCE: _____

FIRST EUCHARIST: _____

(School must be provided with a copy of child's baptismal certificate for verification purposes, unless child was baptized at St. Patrick Church.)

IS THERE ANY SPECIAL INFORMATION WE NEED TO KNOW ABOUT YOUR CHILD? _____

WHAT ARE YOUR REASONS FOR WANTING TO SEND YOUR CHILD/CHILDREN TO ST. PATRICK CATHOLIC SCHOOL? _____

HOW DID YOU FIND OUT ABOUT ST. PATRICK CATHOLIC SCHOOL? _____

HAVE YOU RECEIVED BAPTISM BUDDY CARDS FROM STUDENTS IN OUR SCHOOL?

___ YES

___ NO

The Parents and/or Guardians of the applicant student hereby agree that they and their applicant student will abide by each of the policies and procedures that may be adopted from time to time by the Diocese of Harrisburg and by the St. Patrick Catholic School, including but not limited to those set forth or referred to in the St. Patrick Catholic School/Diocese of Harrisburg student handbook.

(Parent/Guardian Signature)

(Date)

Any child accepted into St. Patrick Catholic School during the school year will be on probation for a period of 3 months.