



# MOTTO: LEARNING FOR LIFE THROUGH FAITH

Primary Email Address: \_\_\_\_\_

*Circle One*

Parental Marital Status: *Married Separated Divorced Single Widowed Other* \_\_\_\_\_

## PARENT INFORMATION

**Father's Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
(Print) First Middle Last

Address: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Street Address City, State Zip Code

Birthplace: \_\_\_\_\_ Religion: \_\_\_\_\_  
City State

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
(Print) First Middle Last

Address: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Street Address City, State Zip Code

Birthplace: \_\_\_\_\_ Religion: \_\_\_\_\_  
City State

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

**Siblings:** 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_  
1) Name age grade 2) Name age grade 3) Name age grade

4) \_\_\_\_\_ 5) \_\_\_\_\_ 6) \_\_\_\_\_  
4) Name age grade 5) Name age grade 6) Name age grade

**Guardian's Name:** \_\_\_\_\_ Phone: \_\_\_\_\_  
(Print) First Middle Last

Address: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
Street Address City, State Zip Code

Birthplace: \_\_\_\_\_ Religion: \_\_\_\_\_  
City State

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_ Cell: \_\_\_\_\_

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## SACRAMENTAL/PARISH INFORMATION

*If your child is Catholic, please provide the following information along with a copy of the certificate of Sacraments.*

Present Parish (at which the family is officially registered): \_\_\_\_\_

Do you regularly use parish contribution envelopes: Envelope # \_\_\_\_\_ YES NO

Do you attend Mass every weekend as a family? YES NO

Is your child currently attending religious education (CCD) classes? YES NO

If yes, at which parish? \_\_\_\_\_

### **Sacraments Received:**

	Date	Church	City/State/Zip
Baptism			
Reconciliation			
First Communion			

If your child has not received the sacraments of **Baptism**, **First Reconciliation** or **First Holy Communion**, would you like more information regarding classes?  Yes  No

**ACADEMIC/RELIGIOUS RECORDS REQUEST:** *Please attach 2 years previous report cards, the current report card, 2 years standardized test scores and all significant aptitude and achievement test data. Include a copy of the immunizations, birth certificate, baptismal and first communion records where applicable. Applications will not be considered until all information requested is submitted.*

***I affirm that the above information is accurate and true, and that, upon acceptance into the school, I agree to be bound by the principles, policies, and procedures of St. Sebastian School and Preschool.***

Print name of Parent/Legal Guardian \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_