

NATIVITY CATHOLIC SCHOOL – STUDENT APPLICATION FORM

****THIS SECTION TO BE COMPLETED BY SCHOOL PERSONNEL****

Church Envelope # _____ Grade _____ Application Date _____
 Language Fluency: _____ English only _____ Non-English
 _____ Bilingual _____

THE REMAINDER OF THE FORM TO BE COMPLETED BY PARENT/GUARDIAN - PLEASE PRINT

Student's Last Name _____ First Name _____ Middle Name _____ Grade _____ Male/Female _____

Student's Birthdate (Month/Day/Year) _____ Student's Social Security # _____ Student's Place of Birth (City/State/Country) _____

Home Address _____ City _____ Zip Code _____ Home Phone _____

Home Language Description (what language is spoken in the home) _____ Student Health Alert, Medications, Allergies, etc. _____

RELIGIOUS INFORMATION

Has the student been Baptized? _____ If not, do you wish him/her to be Baptized? _____

Date of Baptism: _____ Church: _____ City: _____

Has the student received First Holy Communion? _____ If not, do you wish him/her to do so? _____

Date of First Communion: _____ Church: _____ City: _____

What brings you to Nativity? _____

Please list all schools your child has attended beginning with kindergarten.

<u>School Name</u>	<u>City</u>	<u>Years</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Reason for leaving present school: _____

PARENT/GUARDIAN INFORMATION:

_____ Married _____ Divorced _____ Single

Name Relationship to Child

Home Address City Zip Code Home Phone

Employer Occupation/Title Pager/Cell Phone

Work Address City Zip Code Work Phone

Religion: _____ E-mail Address: _____

OTHER PARENT/GUARDIAN INFORMATION:

_____ Married _____ Divorced _____ Single

Name Relationship to Child

Home Address City Zip Code Home Phone

Employer Occupation/Title Pager/Cell Phone

Work Address City Zip Code Work Phone

Religion: _____ E-mail Address: _____

PRIMARY RACE/ETHNICITY (Mark the group that your child most closely)

- | | |
|---|---|
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> American Indian/Alaskan Native |
| <input type="checkbox"/> White (not of Hispanic origin) | <input type="checkbox"/> Filipino/Filipino American |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Pacific Islander |
| <input type="checkbox"/> Asian/Asian American | |

STUDENT LIVES WITH:

_____ Mother _____ Father _____ Stepmother _____ Stepfather _____ Other (_____)

COURT ORDERED CUSTODY ALERT:

Is the student being enrolled part of a "Court-ordered" custody settlement? _____ Yes* _____ No

***Court documents must be on file in the school office upon admission**

PROFESSIONAL TESTING

Has the student received professional psychological (psychological, educational, etc.)? _____ Yes* _____ No

Does the student have an IEP? _____ Yes* _____ No

***All testing results and IEPs must be on file in the school office upon admission**

I hereby verify that all information on this form is true and correct to the best of my knowledge.

Parent/Guardian Signature

Date Signed