ST. VINCENT DE PAUL SCHOOL

Application for Enrollment, School Year 2008-2009

STUDENTS INFORMATION:

Student's Name:

(Last Name) (First Name) (Middle Name)

Grade Student is Entering:

Social Security Number:
#.....-.....-.....

Sex: [ ] Female [ ] Male

Race: [ ] Caucasian, [ ] Hispanic, [ ] Black,
[ ] Asian, [ ] Native American

Date of Birth: _____/_____/_____

Place of Birth: .....
City, State: .....

Date of Baptism: _____/_____/_____

Place of Baptism: .....
Church: .....
Address: .....
City, State, Zip .....

Date of Reconciliation: _____/_____/_____

Place of Reconciliation: .....
Church: .....
Address: .....
City, State, Zip .....

Date of Communion: _____/_____/_____

Place of Communion: .....
Church: .....
Address: .....
City, State, Zip .....

Date of Confirmation: _____/_____/_____

Place of Confirmation: .....
Church: .....
Address: .....
City, State, Zip .....

Student lives with: [ ] Parents, [ ] Guardian,
[ ] Father, [ ] Mother

Public School District in which family lives:

School Last Attended:
Name: .....
Address: .....
City, State, Zip: .....

Signed: .....

PARENTS INFORMATION:

Father's Name:

(Last Name) (First Name) (Middle Name)

Mother's Name:

(Maiden Name) (First Name) (Middle Name)

Guardians Name:

(Last Name) (First Name) (Middle Name)

Address:

City, State, Zip:

Home Phone:

Email Address:

Marital Status:

[ ] Married, [ ] Separated, [ ] Divorced, [ ] Single

Language Spoken in Home:

Parents Religion:
Father's: .....
Mother's: .....

Registered Parish
Parish Env. #

Father's Employment:
Company Name: .....
Address: .....
City, State, Zip: .....
Phone Number: .....
Occupation: .....

Mother's Employment:
Company Name: .....
Address: .....
City, State, Zip: .....
Phone Number: .....
Occupation: .....

Brothers and Sisters: Birth Date:

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Significant Health Factors:
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Date: .....