



**For office use only:**

Birth Certificate \_\_\_\_\_

Baptism Certificate \_\_\_\_\_

## ADMISSIONS APPLICATION 2010-2011

\$100 per child application fee must be included with this application. This fee is non-refundable unless your child is not offered admission. Students accepted by the school will receive an acceptance letter and a registration packet.

### **CHILD'S INFORMATION:**

Applying to grade: K 1 2 3 4 5 6 7 8 (Please circle)

Child's name: \_\_\_\_\_ Sex: \_\_\_\_\_ Birth date: \_\_\_\_\_

Address: \_\_\_\_\_ Home phone: \_\_\_\_\_

Child's religion & church affiliation: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Previous school: (if applicable) \_\_\_\_\_ Address: \_\_\_\_\_

Presently enrolled siblings: \_\_\_\_\_ Previously enrolled siblings: \_\_\_\_\_

### **FAMILY INFORMATION:**

Parent/guardian #1: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Religion: \_\_\_\_\_

Cell/Home Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Parent/guardian #2: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Religion: \_\_\_\_\_

Cell/Home Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Are you a registered member of the Madeleine Parish? Yes \_\_\_\_\_ No \_\_\_\_\_ How long? \_\_\_\_\_

### **RECORD OF CHILD'S SACRAMENTS RECEIVED**

Baptism: Date \_\_\_\_\_ Church \_\_\_\_\_ Church address \_\_\_\_\_

Holy Eucharist: Date \_\_\_\_\_ Church \_\_\_\_\_ Church address \_\_\_\_\_

Reconciliation: Yes \_\_\_\_\_ No \_\_\_\_\_

**Have you read the Admission Priority Policy Statement: Yes \_\_\_\_\_ No \_\_\_\_\_**

(Please complete other side)

Please briefly describe your child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please describe any special needs of which we should be aware: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Date application received: \_\_\_\_\_ Time application received: \_\_\_\_\_

Application fee received: Yes \_\_\_\_\_ No \_\_\_\_\_ Amount: \_\_\_\_\_

Check # (if applicable) \_\_\_\_\_

Seat offered: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_ Letter/Verbal

Wait listed date: \_\_\_\_\_

**Family Action:**

Date seat accepted: \_\_\_\_\_ Date seat declined: \_\_\_\_\_

Date Registration fee received: \_\_\_\_\_ Amount: \_\_\_\_\_