2026-2027 SCHOOL APPLICATION

(July 2026-June 2027)

Child's Name: _____ Birthdate: _____ Gender: _____
Last First MI

Address: _____
Street City/State Zip

Best Contact Phone Number: _____ E-mail: _____

List Previous School(s) attended: _____

Religion: _____ If Catholic, Baptized? Yes [ ] No [ ]

If Catholic, Current Parish: _____ Registered Parishioner? Yes [ ] No [ ]

Race (Check one or more)

a American Indian or Alaskan Native
b Asian
c Black or African American
d Native Hawaiian or Other Pacific Islander
e White
f Two or more Races

Ethnic Background (Check **one** only)

a] Hispanic or Latino

b] Non-Hispanic or Latino

Language Spoken At Home

a English

b Other_____

N.B. The Catholic School Department must report to the National Catholic Education Association, Federal and local agencies **summary** data on the sex and ethnic backgrounds on our students. Therefore, it is required that each person applying for admission to a Catholic school indicate his or her sex and ethnic background on the application form. This information does not affect determination of admission. The ethnic designations are used to indicate neral group to which a person appears to belong, identify with.

FATHER'S LAST NAME	FIRST	MI	ETHNIC	RELIGION	OCCUPATION
HOME ADDRESS		CITY		ZIP	HOME PHONE
EMPLOYER	EMPLOYER ADDRESS		CITY	ZIP	BUS. PHONE
MOTHER'S LAST NAME	FIRST	MI	ETHNIC	RELIGION	OCCUPATION
HOME ADDRESS		CITY		ZIP	HOME PHONE
EMPLOYER	EMPLOYER ADDRESS		CITY	ZIP	BUS. PHONE

CHILD LIVES WITH: BOTH PARENTS FATHER MOTHER [ ] GUARDIAN
PARENTS ARE: MARRIED [ ] DIVORCED DECEASED: MOTHER [ ] FATHER [ ]

GUARDIAN LAST (IF APPLICABLE)	FIRST	MI	ETHNIC	RELIGION	OCCUPATION
HOME ADDRESS		CITY		ZIP	HOME PHONE
EMPLOYER	EMPLOYER ADDRESS		CITY	ZIP	BUS. PHONE

PROGRAM PREFERENCE: (Please indicate choice) [School-Day _] [School-Day Plus _____]

Referred to SJCP by: Advertisement Previous child(ren) attended Family/Friend_____

FOR OFFICE USE ONLY:

Fees Paid	Application/Regis.	Comp. Fee	Financial Asst.	QB ☐	FACTS ☐
Date/Amount Paid					
Enrollment Date:			Assignment:		