

## **STUDENT INFORMATION**

(Additional Students on	the Back)			
FULL NAME	GRADE LEVEL			
SCHOOL/DAYCARE PRE	VIOUSLY ATTENDED		GRADE/L	EVEL COMPLETED
DATE OF BIRTH	SOCI	AL SECURITY NUMBER	ETHNICIT	Υ
CHILD LIVES WITH	Both Parents	Mother	Father	Other
If other, please explain: (Custody papers must be	e on file in the school o	office.)		
SACRAMENTS	DATE	CHURCH		
Baptism				
1 <sup>st</sup> Reconciliation				
1 <sup>st</sup> Communion				
	PARENT/0	GUARDIAN INFORMA	<u>TION</u>	
PARENT/GUARDIAN #1		PARENT/GUAR	DIAN #2	
Name		Name		
Relationship to Stud.		Relationship to	Stud.	
Mailing Address		Mailing Addres	<u> </u>	
Cell Phone				
Work Phone		Work Phone		
Employer		Employer		
E-mail		E-mail		
Faith Tradition		Faith Tradition		
CHURCH MEMBERSHIP		I		
Are you a current memb	er of St. Edward Paris	:h?Yes	No	
If NO, of which church/p	oarish are you a memb	oer?		
Do you anticipate joining	g St. Edward?	Yes	No	

## **ENROLLMENT APPLICATION (CONTINUED)**

FULL NAME			GRADE LEVEL	
SCHOOL/DAYCARE P	GRADE/LEVEL COMPLETED			
DATE OF BIRTH	SOCIAL SECURITY NUMBER		ETHNICITY	
CHILD LIVES WITH	Other (pleas	se explain): Both Parents pers must be on file in the school		
SACRAMENTS  Baptism	DATE	CHURCH		
1 <sup>st</sup> Reconciliation 1 <sup>st</sup> Communion				
FULL NAME  SCHOOL/DAYCARE PREVIOUSLY ATTENDED			GRADE LEVEL  GRADE/LEVEL COMPLETED	
DATE OF BIRTH	S	OCIAL SECURITY NUMBER	ETHNICITY	
CHILD LIVES WITH	Both Parents Both Parents Both Parents Both Parents Custody papers must be on file in the school office.)			
SACRAMENTS	DATE	CHURCH		
Baptism		_	<u></u>	
1 <sup>st</sup> Reconciliation				
1 <sup>st</sup> Communion				
ENROLLMENT CHECKLI	ST			
Enrollment Enrollment Appl Emer. Contact / Registration Fee FACTS Tuition Ag	ication  Medical Form  per Student	lent Information  Original Birth Certificate (Copy)  Baptismal Certificate (Copy)  Social Security Card (Copy)	Student Medical Information Vaccination Record Vision Screening Physical Form	