

STUDENT INFORMATION		
Student Name:		2021-2022
		Grade
Address:	City, Zip:	
Student Home Phone:	Gender:	Student Birthdate:
Place of Birth:	Language Spoken at Home:	
Please List the Last Two Schools Attended:		
Previous School Attended:	Phone Number:	
Grade Attended:	Were any grades repeated?:	Yes No
	If yes, which grade?	
Previous School Attended:	Phone Number:	
Grade Attended:	Were any grades repeated?:	Yes No
	If yes, which grade?	
HAS YOUR CHILD EVER HAD A PSYCHOEDUCATIONAL EVALUATION?		Yes No
DOES YOUR CHILD HAVE AN INDIVIDUALIZED LEARNING PLAN?		Yes No
DOES YOUR CHILD RECEIVE OR HAS YOUR CHILD EVER RECEIVED SPEECH/LANGUAGE SERVICES?		Yes No
How did you hear about the school? Parish Bulletin Website Recommended by _____		
Religion:		
Present Parish:		
Parish Env #		
PARENT/GUARDIAN INFORMATION		
Student Lives With: <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian:		
Mother's/Guardian Name: <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Father's/Guardian Name:	
Please print	Please print	
Mother's Address:	Father's Address:	
City, Zip	City, Zip	
Home Phone Number:	Home Phone Number:	
Cell Number:	Cell Number:	
Work Number:	Work Number:	
Email:	Email:	
Employer:	Employer:	
Occupation:	Occupation:	
Living: <input type="checkbox"/> Yes <input type="checkbox"/> No Catholic <input type="checkbox"/> Yes <input type="checkbox"/> No	Living: <input type="checkbox"/> Yes <input type="checkbox"/> No	Catholic: <input type="checkbox"/> Yes <input type="checkbox"/> No
School Alumni: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Grad Year:	School Alumni: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Grad Year:
FINANCIAL INFORMATION		
Does your child receiving funding from Step Up for Students?		Yes No
Does your child receive funding from AAA?		Yes No
Does your child receive funding from FES?		Yes No
Does your child receive funding from the John MckKay Scholarship?		Yes No
Other Family member(s) who have graduated from this school (list name, relationship & grad year):		
Name:	Name:	Name:
Relationship:	Relationship:	Relationship:
Grad Year:	Grad Year:	Grad Year:
Parent/Guardian Signature:		Date:
NOTE: The Archdiocese of Miami is authorized under federal law to enroll nonimmigrant alien students and issue I-20 certificates in order for students to obtain F-1 status. If you need assistance, please let the school know at registration.		

For Office Use Only: Payment Type: Cash ___ Check # _____ Money Order _____

Amount: _____ Date: _____ Processed by: _____ Signature/Initials: _____