



# St. Monica Catholic School

## Application for Admission

Entering Grade: \_\_\_\_\_ School Year: \_\_\_\_\_

### Student Information

Full Name: \_\_\_\_\_ BOY  GIRL   
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

City State ZIP Code

Family Phone: \_\_\_\_\_ Family Email \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_ Date of 1<sup>st</sup> Communion: \_\_\_\_\_

*Preschool applicants must be 3 years old by August 31 and fully potty-trained.*

### Parent/Guardian Information

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer/Occupation: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer/Occupation: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Attend St. Monica Church? YES NO Current Stewardship card YES NO  
If no list church   on file?

Is your preschool student planning on attending K-8 at St. Monica School? YES NO

### Sibling Information

Name: \_\_\_\_\_ Age/Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age/Grade: \_\_\_\_\_

*List additional siblings on back*

### Schools Previously Attended

Year: \_\_\_\_\_ Grade: \_\_\_\_\_ School \_\_\_\_\_ City: \_\_\_\_\_

Year: \_\_\_\_\_ Grade: \_\_\_\_\_ School \_\_\_\_\_ City: \_\_\_\_\_

### Signature

*Return completed application to the School Office, along with a \$150 non-refundable application fee.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Toured: \_\_\_\_\_ Date Assessed: \_\_\_\_\_ Date Accepted: \_\_\_\_\_ Date Enrollment Sent: \_\_\_\_\_